

NOTE: Additional trip information may be attached to this form based upon the unique circumstances of a particular trip. All other modifications require approval of the Office of Legal Services.

## PARENT NOTIFICATION/CONSENT FORM New York City Department of Education (DOE)-Sponsored DAY TRIP

Name:	Class:	
School (list additional trip sponsors when applicable Trip Coordinator: JonAlf Dyrland-Weaver	: Stuyvesant High School	_ Trip Date: 4 / 8 / 24
Destination: Rockefeller Park		
Departure Site: School - 1st Floor Lobby	Departure Time:	2:55pm
Return Site: School		3:35pm
Mode of Transportation: Walking		
Purpose of Trip: View the solar eclipse		
Specific Clothing/ Equipment Required for this Trip:	Eclipse glasses - will be provide	led
This trip will include the following physical and sp boating):	ports activities (e.g. swimming, hors	
a) I understand that there are risks of injury associto my child's participation in all these activities of the second s	except for the following:	
medication needs, or the need for visual or aud		

- c) I agree that in the event of an emergency injury or illness, the staff member(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child.
- d) I understand that my child is expected to behave responsibly and to follow the school's discipline code and policies.

- e) I agree and understand that I am responsible for the actions of my child. I release the school from all claims and liability that arise in connection with the trip, except if due to the negligence of school officials.
- f) I understand that I am responsible for getting my child to and from the departure and return sites identified above. I understand that my child shall be accompanied by staff member(s) during the trip, including while traveling from the departure site to the destination site, and from the destination site to the return site.
- g) I understand that alcoholic beverages and/or illegal drugs are prohibited and have discussed this prohibition with my child. I understand that if my child is found in possession of these substances, they will be subject to school disciplinary procedures and possible criminal prosecution.

	school disciplinary procedures and possible criminal	prosecution.			
h)	I understand that students who violate the school's different participating in a trip.	scipline code m	ay be excl	uded in the future by the sch	ool
i)	In an emergency I can be reached at: Day: ()		Evening	: ()	
	Additional Contact: Name:	Day: () _		Evening: ()	
j)	I give my permission for my child to participate inthis	s school trip.			
	(Signature of Parent/Guardian)			(Date)	
	STUDENT DE	ECLARATION			
	(to be signed by Middle School	ol and High Sch	nool stude	nts)	
	ave read this form and I understand that I am to act of coected to conduct myself in school.	on this trip in the	e same re	sponsible manner in which	am
	(Signature of Student)			(Date)	