

## Permission Form

**To be completed by Teacher:**

1. Teacher Sponsoring Field Trip: Hillary Hytken \_\_\_\_\_ Grade: 5 & 6 Today's Date: 2/17/2010

Permission slips due to teacher by: March 5 2010

2. Destination: St. John's 5 & 6 Grade Lockin

3. Date(s) of Trip: March 12 2010 6PM til 12AM

4. The cost per child will be: \$35 (Make checks payable to **STJES**.)

Children may bring pillows, sleeping bags, a change of clothes, toothbrushes etc. Phones will be collected at the door, ipods and handheld video games may be brought. All food (dinner, snacks) will be provided. Please have each student bring or wear gym shoes for any time spent in the gym.

**To be completed by Parent:**

7. Parent **MUST** check one:

- \_\_\_\_\_ My child **NEEDS** medication to be administered on this Field Trip (See **PARENTS** below)  
 \_\_\_\_\_ My child **DOES NOT NEED** medication administered on this Field Trip.

**PARENTS:** If your child needs medication that is not on file with the school during this Field Trip, you must review the **Guidelines for Medication Administration on School Sponsored Field Trips** on the back of this sheet. Complete and return the appropriate medication form/s along with required medication/s **at least two weeks** prior to Field Trip. Copies of Medication forms: *Administration of Prescription Medications/OTC Medication Form* may be obtained from front office or downloaded on-line via parent portal.)

8. Father: Name \_\_\_\_\_ Hm \_\_\_\_\_ Wk \_\_\_\_\_ Cell \_\_\_\_\_

9. Mother: Name \_\_\_\_\_ Hm \_\_\_\_\_ Wk \_\_\_\_\_ Cell \_\_\_\_\_

10. My child, \_\_\_\_\_, has my permission to attend this trip.  
 My child also has permission to view PG rated movies.

Parent Signature \_\_\_\_\_

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**Parents: Please tear off and keep this portion for your own future reference.**

Field Trip Destination: \_\_\_\_\_ Date(s): \_\_\_\_\_

Address: \_\_\_\_\_

STJES Departure Time \_\_\_\_\_ STJES Arrival Time \_\_\_\_\_

Dress Code: Regular Uniform \_\_\_\_\_ Dress Uniform \_\_\_\_\_ Out of Uniform \_\_\_\_\_

Lunch: Needs to bring a bagged lunch \_\_\_\_\_ Will eat at school \_\_\_\_\_

## **St. John's Episcopal School Guidelines for Medication Administration On School Sponsored Field Trips**

### **PLEASE CAREFULLY FOLLOW EACH STEP IF YOU WANT YOUR CHILD TO RECEIVE MEDICATION ON THE FIELD TRIP**

- If your child needs any prescription and /or over the counter medications that are not currently on file with the school, you must complete the appropriate forms. **A separate order is required for each medication.**
  1. For prescription medications, both the parent and your child's health care provider must complete the appropriate medication forms.
  2. For over-the-counter medications, the parent must complete the appropriate medication forms. Forms may be picked up in the front office. (Forms also available for download on line via parent portal)
- **NO** prescription medications can be administered without a doctor's order, unless the parent is accompanying the student on the trip and will administer the medications.
- The Doctor's order and the pharmacy label on the medication bottle must match each other. If the instructions are different, the forms and medication will be returned to parent.
- Place each medication in its own zip lock-type bag with the appropriate completed medication form. (All medications must be in the **original pharmacy labeled** container with your child's name on it **2 weeks before the date of the trip.**)
- Label the bag clearly with your child's name.
- Medication packet/s must be brought to the front office at least two weeks before the Field Trip.
- **MEDICATIONS WILL NOT BE ACCEPTED THE MORNING OF THE TRIP.**

(St. John's needs two weeks to process the forms and set up procedures for administration of medications.)
- Medications are required to be picked up by the parent the day their student returns from the Field Trip.