



P.S. / I.S. 226
 The Alfred De B. Mason School
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Evan Klein, Principal

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Parent Notification/Consent Form Day Trip Permission Slip

Chancellor’s Regulation A-670

NOTE: This document may require modification based upon the unique circumstances of a particular trip.

NAME: _____ **Class:** 823

School (list additional trip sponsors when applicable) _____ I.S. 226

Trip Date: 05/03/19 **Destination:** Brooklyn Bridge Park Education Center

Advisor(s): Ms. Toyber, Mr. Kent, Ms. M (student teacher)

Departure Site: P.S./ I.S. 226 **Departure Time:** 9:30 am

Return Site: P.S./ I.S. 226 **Return Time:** 2:00 pm

Mode of Transportation: SUBWAY and walking

Purpose of Trip: “Examine the sustainable and green design of the park including water conservation, ecological initiatives, and material reuse.”

Specific Activities Planned: “A guided tour is embedded with activities and challenges for students that promote a deeper understanding of these innovative concepts.”

I, the parent/guardian of the student named above, hereby give my permission for my child to take part in the trip described above. I understand that the following conditions apply:

a) 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.

b) I understand that my child is expected to behave responsibly and to follow the school’s discipline code and policies.

c) I agree and understand that I am responsible for the actions of my child, and I release the school from all claims and liabilities that arise in connection with the trip, except if due to the negligence of school officials.

d) I confirm that my child is medically fit and able to participate in all activities described above, except for the following activities:

e) I have indicated below any permanent or temporary medical or other condition(s) including special dietary and medication needs, or the need for visual or auditory aids, which should be known about my child: _____

f) I understand that as a parent, if I believe it is necessary to limit my child's activity to a great extent, then the school may not be able to accommodate my child on this trip and that I and my child will be informed of this decision as soon as possible upon the receipt by the school of this completed consent form.

g) 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. h) 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, he/she will be subject to school disciplinary procedures and possible criminal prosecution.

h) I understand that students who violate the school's discipline code may be excluded in the future by the school from participating in a trip.

i) In an emergency I can be reached at: PHONE: () _____

Additional Contact: Name _____ Day: () _____

J) I give my permission for my child to participate in this school trip.

(Signature of Parent/Guardian) (Date)

STUDENT DECLARATION (to be signed by Middle School and High School students)

I have read the Parent Notification/Consent Form and I understand that I am to act on this trip in the same responsible manner in which I am expected to conduct myself in school.

Students are encouraged to do the following:

***** BRING A PACKED LUNCH**

***** \$5 FOR PROGRAM COSTS**