April 24, 2018

Dear Parents & Guardians,

Bernal Intermediate will host the annual eighth grade activity on Tuesday, June 5, 2018 at Great America Park. This activity is considered to be one of the highlights of graduation festivities.

All students desiring to participate in this event should complete and return the permission slip with $50.00 (cash only—NO checks) to their Advisory teacher before Friday, May 25. The $50.00 will cover the cost for admission to the park and bus transportation. Students with season passes need to complete a permission slip, indicate on the form that they have a pass, and return the form and $16.00 for transportation. (There will be no refunds to students who are absent on the day of the trip, miss the event due to disciplinary action, or to students who are not eligible to graduate.)

Thank you for helping us ensure available bus space and group rates for tickets by submitting forms and money no later than Friday May 25th. Bus reservations and permission slips will NOT be accepted after Friday, May 25th.

WHERE: Great America Park, Santa Clara
DATE: Tuesday, June 5, 2018 - 9:00 a.m. to 5:30 p.m.

WHAT TO WEAR/BRING: As outlined in the Binder Reminder, students’ attire must adhere to the guidelines for “free dress” day. Lunch may be purchased by students at Great America for an approximate cost of $10-20.

TRANSPORTATION: Students will be transported to and from Great America Park by district-provided buses ONLY. There will be no activity bus following the return to Bernal. Students may walk home or be met by parents at Bernal at approximately 5:30 p.m. Please arrive promptly at 5:30 for pickup, or arrange a carpool with other 8th-grade parents, as supervision of students will not be available after 5:45 pm.

My student will: ___ walk home.
___ be picked up promptly at 5:30 PM by _________________.
Contact cell # for pickup person _________________________

Sincerely,
Keely Elizabeth Berg
Assistant Principal
EXCURSION TRIP WAIVER AND MEDICAL AUTHORIZATION-MINOR
(EDUCATION CODE SECTION 35330)

Name of School: **BERNAL**
I hereby give my permission for my child, _____________________________________________________, to participate in the eighth grade Great America Field Trip as part of his/her regular school program. This trip is scheduled on **Tuesday, June 5, 2018**. Great America will be by district provided buses. All students must travel to and from Great America via district provided buses.

I fully understand that my child will follow all school guidelines and Great America rules and requirements governing conduct during the field trip. I understand that any student determined to be in violation or unfulfilling of these behavior standards will be sent home at the parents' expense and suspended 3-5 days, thus losing the eighth grade dance and graduation ceremony. For example, weapons, fighting, and shoplifting/stealing would all result in suspensions that would cause a student to lose the eighth grade dance and graduation ceremony. Any student late to the 4:30 p.m. bus or violating the Bernal free dress guidelines outlined in the *Binder Reminder* will lose the eighth grade dance privilege.

I, the undersigned, hereby release and discharge the Oak Grove School District, officers, employees, agents and servants (herein collectively referred to as "District") from all liability arising out of or in connection with the above described field trip or excursion. For the purpose of this agreement, liability means all claims, demands, losses, causes of action, suits, or judgments of any and every kind that I, my heirs, executors, administrators or assignees may have against the District because of any death, personal injury or illness, or because of any loss or damage to property that occurs during the above described field trip or excursion and that results from any cause.

In the event of any illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care from a licensed physician and/or surgeon is deemed necessary for the safety and welfare of my child. It is understood that the resulting expenses will be the responsibility of the parent(s) or participant.

___________________________________ / ___ / ___ / ___ / ___
Signature of Parent or Guardian Date Address Phone

___________________________________ / ___
Signature of Student Date

___________________________________ / ___
Health Insurance Company Policy Number

**Special note to parents/guardians:**
(1) All medication must be registered on this form; (2) All medications, except those which must be kept on the student's person for emergency use, must be kept and distributed by the staff; (3) _____ Check here if there are no special problems that the staff should be aware of and no medications are required on the trip; (4) If any medications are to be taken by student, list them here.

Name of medication(s) and reason: _______________________________________________________

If your son or daughter has a special medical problem, kindly attach a description of that problem to this sheet.

RETURN PERMISSION SLIP & EXACT CASH BY FRIDAY, MAY 25th – $50 TICKET + TRANSPORTATION or $16 TRANSPORTATION ONLY