

CADET _____

PLATOON _____

HANOVER COUNTY PUBUC SCHOOLS
ASHLAND, VIRGINIA 23000
TRANSPORTATION 4 FIELD TRIP Authorization FORM

NAME OF SCHOOL: Patrick Henry High School

DATE: 14NOV16

NAME OF STUDENT: _____

This form shall be used to secure parent/guardian authorization, which requires the use of county or commercial buses, private automobile or other transportation for student educational trips located outside of school premises.

Teacher's Name:	LT J Head / MGySgt Dubose/SC Summerfield	Date of Trip: 20NOV16
Class/Subject:	NJROTC	
Location:	Ashland VA	
Time of Departure:	12PM /20NOV16 (Sunday)	
Time of Return:	4PM (estimate) 20NOV16	

SUPERVISOR: Students participating in the above described field trip sponsored by the Hanover County Public Schools with, at all relevant times during the field trip, be supervised by professional instructional and support staff of the Hanover County Public Schools. In some circumstances, the students also may be accompanied by parent chaperones.

METHOD OF

TRANSPORTATION X School Bus **REQUIREMENTS:** This is a MANDATORY event for grade which was disclosed in the Cadet/Parent Agreement form signed at the beginning of the year. All cadets will meet at PHHS JROTC room at 12 noon. Uniform is SDB's for Officers/Chiefs NSU's for all others. Parents can either pick cadet up at Gandy School around 330-4, allow cadet to walk home or to parade from Gandy or return to PHHS and pick up by parent. Parents MUST be at school to pick up cadets on time. Please circle your choice below and initial. **NOTE: Cadets must remember headgear!!!!**

INSURANCE: I understand that the Hanover County School Board may not carry insurance relative to the trip or for injuries to the student.

ACKNOWLEDGEMENT/CONSENT:

I request that the above named student be allowed to participate in the trip planned and specifically consent to his/her participation. If any emergency medical procedures or treatment are required during the trip, I(We) consent to the trip supervisor(s) talking, arranging for or consenting to the procedures or treatment at his/her/their discretion.

I expressly agree to reimburse the Hanover County School Board, its individual members, agents, employee, and representatives, as well as trip supervisors, for any losses, damages or injuries arising out of, during, or in connection with the above named student's participation in the trip, including the costs incurred for the rendering of emergency medical procedures or treatment, if any.

Parent/Guardian

Date

Phone Number where parent can always be reached

I will (1) Pick Cadet at Gandy (2) Allow Cadet to walk (3) Pick Cadet at PHHS (circle and initial)