



A.P. 6153 – STUDENT TRIPS
Attachment 3 - Permission Slip (CONT'D)

RETURN THIS COMPLETED FORM TO YOUR CHILD'S SCHOOL

School: Chesapeake Math & Information Technology Academy North High School

Date: January 15, 2025

I/We hereby give permission for our son/daughter _____ to participate in the
(student's name)

field trip to Busch Gardens Amusement Park on April 25, 2025 for Environmental Justice Club- Launch into Physics
(destination) (date) (class, group, organization)

being sponsored by Dr. Gemma Clarke and Ms. Ryan Tarver
(sponsoring teacher)

Parent's Signature _____

Date: _____

Emergency Medical Treatment Authorization

Parents or Guardians (Please print):		
1.	Phone (w):	Phone (c):
2.	Phone (w):	Phone (c):
Emergency Contact: (if parents can't be reached)		
1.	Phone (w):	Phone (c):

Student Health Information

1. Does your child currently have a Prescriber's Medication Order Form on file to receive authorized medication at school? Yes No

A Prescriber's Medication Order Form and medication(s) for all prescription and/or non-prescription medications (not administered at school) to the nurse properly labeled at least 30 days prior to field trips to ensure adequate time for packing of medications as well as to train staff on medication administration and documentation.

2. Does your child have any medical conditions or disabilities? Yes No
 If yes, please explain: _____

3. Does the above restrict any activities? If, yes, please explain below: Yes No

4. Is your child covered by hospitalization and/or accident insurance? Yes No

Name of Insurance Carrier: _____

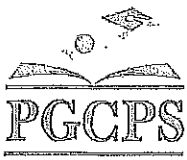
Family Physician (Name and Phone): _____

Dentist (Name and Phone): _____

NOTE: In a serious emergency, your son/daughter may have to be taken to the nearest hospital emergency room. Should such action be necessary, you will be notified as soon as possible and will be responsible for any charges incurred. The school has no funds to meet the bills resulting from care, which is sought outside the school setting. It is important that you understand that your signature on this card does not give the hospital permission to treat your son/daughter.

Parent/Guardian _____

Date: _____



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BOARD OF EDUCATION OF PRINCE GEORGE'S COUNTY

School: Chesapeake Math & Information Technology
Academy North High School

Date: January 15, 2025

Dear Parent(s)/Guardian(s):

This is to inform you that the Environmental Justice Club is planning a field trip
(class, group, organization)

to Busch Gardens Amusement Park on April 25, 2025
(destination) (date)

The sponsoring teacher for this trip is Dr. Gemma Clarke and Ms. Ryan Tarver

Students will be able to

-Understand Newton's Second Law of Motion and its mathematical relationship
(Force = Mass x Acceleration).

-Understand Newton's Third Law of Motion and how forces are exerted in pairs.

-Relate these concepts to real-life examples, specifically to amusement park rides
such as The Trade Wind and Der Autobahn at Busch Gardens.

The purpose of this trip is to

Students intending to participate in said field trip are expected to assemble at the school on the date of the trip at
5am
(time) Depending on the departure and/or return time, you may be responsible for transporting your child to and/or from school.

Transportation to and from the field trip destination will be provided by Martz Group Transportation
(public school bus or authorized commercial carrier)

The cost to each participating student is \$ 120 (50 Kickboard points) (no referrals)

April 1, 2025 and the remaining balance of \$ n/a is due on or before April 1, 2025
(date) (balance) (date)

Chesapeake Math &
Information Technology

Kindly make payments to the order of Academy High School which is handling all of the
(Name of authorized travel agency)

arrangements for this trip.

In the event of cancellation, the Board of Education of Prince George's County shall assume no responsibility or liability for the
failure of any travel agency or other source having assumed the responsibility of making travel arrangements, failing to issue
refunds, in whole or in part, to the students originally anticipated to participate in the student trip. *You should also be advised
that this payment may be non-refundable if your son/daughter cancels the trip participation and no substitute student can be
found to take and pay for said trip in his/her place.

Furthermore, please be informed that it is the policy of the Board of Education of Prince George's County that no student be
denied the opportunity to participate in a Field Trip for reasons on inability to pay. Accordingly, if you are desirous of having
your son/daughter participate in said Field Trip but are unable to pay therefore, please call me at your earliest opportunity.

*This field trip will be funded in part by Board of Education school budget funds.

Sincerely,

Supplemental Information:

Empty box for supplemental information.