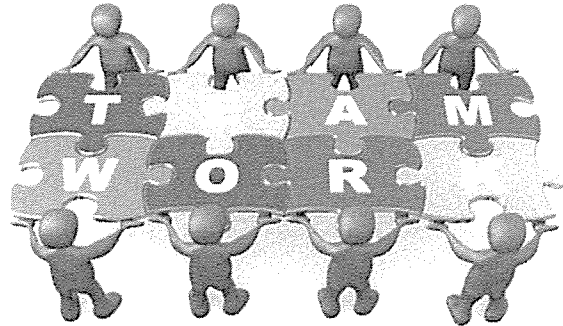


7th Grade

Project Adventure Trip



Where: Scotch Plains- Fanwood High School

When: Monday, October 25, 2021

Rain Date: Tuesday, October 26, 2021

Time: 8:30 A.M. till 11:00 A.M.

Purpose: The purpose of Project Adventure is to provide students with an interactive learning experience to build character and promote working together towards a common goal. Along the way, students will develop greater self-confidence, mutual support within a group, problem solving skills, and the ability to work cooperatively with others.

Students will be walking from Park Middle School to Scotch Plains- Fanwood High School via a designated route with police crossing.

Students should wear sneakers, bring a bottle of water, and dress in layers for cooler weather. Grade 7 Lunch will be held at its normal scheduled time.

Please complete the attached permission/medical slip and return to your Social Studies teacher.

We are looking for Parent/Guardian Chaperones.

Please consider joining us for this fun activity. If interested, please email ckrasovsky@spfk12.org to sign up!!! Volunteers offer a huge resource and support base for our school community. To that end we also need to make every effort to keep our school community safe and healthy. All school volunteers will need to present proof of vaccination.

SCOTCH PLAINS-FANWOOD PUBLIC SCHOOLS
FIELD TRIP PERMISSION SLIP

Directions: Please complete all sections of the permission form and turn it in to your teacher/advisor 10 days prior to the trip.

SECTION 1:

Social Studies

Student Name: _____ Teacher: _____

Destination/Activity: _____ Project Adventure

Date of Trip: October 25, 2021 Time of Departure: 8:30 AM Time of Return: 11:00 AM
Rain Date: October 26, 2021

1. Students participating in a school field trip are to observe all school behavior expectations.
2. Student luggage and lodging rooms are subject to inspection and search at any time by school officials.
3. It is the student's responsibility to arrange for missed work resulting from this field trip.
4. I understand that this form must be completed and turned in to the teacher/advisor at least 10 days prior to the field trip.

Please list all information that medical providers, staff and chaperones may need to know for the proper care of your child in case of an emergency:

_____ Asthma Inhaler: _____

_____ Allergies List: _____

_____ Heart Murmur _____

_____ Seizures Explain: _____

_____ Diabetes Insulin Type: _____

Insulin Type: _____

Other Conditions (Be specific): _____

Medications Being Taken: _____

Medications Being Taken:

Medication cannot be administered on field trips. If your child has a life threatening medical condition, (i.e. asthma, anaphylactic reaction) which requires medication, please contact the school nurse for a request for self-administration of medication form which your doctor must complete and sign. The completed form must be returned to the school nurse prior to the date of the field trip. Medication must be in the original prescription labeled container. For any questions regarding medication on field trips, please contact the school nurse.

I have read the contents of this form and hereby give permission for my son/daughter to attend the field trip. I also understand that school officials have the right to conduct reasonable searches of student luggage or other belongings.

Home Phone Number: _____
Area Code Number

Parent/Guardian Work Number: _____
Name Area Code Number Ext.

Parent/Guardian Work Number: _____
Name Area Code Number Ext.

Emergency Number: _____
Name Area Code Number Ext.

Student Signature: _____

Parent Signature: _____

Please return by October 15, 2021