

**PALMERTON AREA JR. HIGH SCHOOL
PARENTAL AUTHORIZATION
FIELD TRIP/ACTIVITY PARTICIPATION**

Student's Name _____ Grade 8

Activity Pocono Valley Resort Field Trip

Location Reeders, PA

Date(s) of Activity May 23, 2018 Departure Time 8:45AM

Date of Return May 23, 2018 Return Time/Location 3:30PM

Advisor's Name Mrs. Seiler School Group 8th Grade

Expenses to Student _____

District Transportation is provided for this activity

District Transportation is NOT provided for this activity

Student participation in this activity is subject to the agreement of the parent/guardian to provide transportation. It is understood that your providing transportation for the student is completely separate of PASD.

As parent/guardian, I grant permission for the student listed above to participate in the activity described above & accept responsibility for the associated transportation as checked above. The teachers/chaperones in charge are requested to authorize emergency medical care for my child while he/she is participating in this activity.

Parent/Guardian Signature _____

Advisor's Signature Mrs. Seiler

Principal's Signature Robert D. Seiler