## Hastings high school

# Varsity Singer Retreat Permission Form

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| The Varsity Singers will be attending a retreat to: | Battle Creek Outdoor Educational Center |

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| Date | September 9th-11th | Times | Leave after school on 9th and return on the 11th in the AM. More details to follow. |
| Location | Outdoor Educational Center | | |
| Cost | $90.00 | | |
| Transportation | Students will be dropped off by parents or by self | | |
| Information | Full Itinerary will be Email to all Students and Parents in August. A down payment for each student of $20 is needed to secure places for the weekend retreat with this release form below. Cash is accepted. Please make all checks payable to *Hastings Choir Boosters.* | | |

NOTE: FINAL AMOUNT IS DUE BY THE FIRST WEEK OF SCHOOL THE OEC CAN BE PAID IN A TIMELY MANNER. ANY QUESTIONS CAN BE ADDRESSED TO MR. CALLAGHAN.

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| Please return this permission slip and first payment by: | | | | | | | | | July 21st, 2016 | | | | | |
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| I give permission for my child | | | | | | |  | | | | in | | Varsity Singers |  |
| to attend the field trip to | | | | Battle Creek OEC | | | | | | on | September 9th-11th | | |  |
| from | Sept. 9 (in the PM) | | | | | to | | September 11th (in the AM) | | | | | |  |
| Enclosed is $ | | |  | | | to cover the cost of the trip. (Exact cash or check made payable to school.) | | | | | | | | |
| Known Allergies:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Medications:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact: | | | | | | | | | | | | | | |
| Name | |  | | | | | | | | | | Phone |  |  |
| Parent/Guardian Signature | | | | |  | | | | | | | Date |  |  |
| Parent Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
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