

CRESTWOOD SCHOOL DISTRICT



Field Trip Data Sheet for FAIRVIEW ELEMENTARY

Dear Parents/Guardians:

In order for your child to attend a school sponsored field trip, the following information is necessary. (Please PRINT)

Last Name: _____ First Name: _____ Grade _____

Address: _____ Home Phone #: _____

Father's Name: _____ Cell Phone #: _____

Employer: _____ Phone #: _____

Mother's Name: _____ Cell Phone #: _____

Employer: _____ Phone #: _____

List ALL medications currently taking: _____

Please list ANY chronic conditions currently known: _____

Family Physician: _____ Phone #: _____

Other information: _____ **PAGER #** _____ **CELL #** _____

Hospital preference: _____

May this information be taken to the hospital in the event of an emergency? YES ___ NO ___

May this information be shared with the Chaperone/s? YES ___ NO ___

If I am NOT available in case of an emergency or illness, I have made arrangements with the person(s) listed below to care for my child:

1: Name: _____ Relationship: _____

Address: _____ Phone #: _____

2: Name: _____ Relationship: _____

Address: _____ Phone #: _____

In case of a serious accident and none of the above can be contacted; what do you want the school to do? _____

My son / daughter _____ **HAS** my permission to attend the High School play preview of "The Little Mermaid" at the Crestwood Secondary Campus on Friday, November 30, 2018.

Signature of Parent/Guardian: _____ Date: _____