

The Renaissance

35-59 81st Street, Jackson Heights, NY 11372

www.renaissancecharter.org • 718-803-0060 • 718-803-3785 (fax)

Charter School

Trip Parental Consent Form

Destination/Purpose of Trip: Kitchen at DO & CO (The Gourmet Entertainment Company)		Class/es: Rensizzle (Culinary Careers Group)
Date of Trip: Thursday, November 29, 2012		Cost: Free
Time of Departure: 9:30am	Time of Return: 12:30pm	Teacher/Staff in Charge: Amanda Scott & Leah Shanahan
Means of Transportation: Bus		Additional Information about Trip: For Thursday, students should bring their own lunch or \$ to buy lunch at school. (Please do not plan to go out for lunch.)

Please tear-off the bottom portion of this form and return to the classroom teacher

Name of Student

Destination/Purpose of Trip	Date of Trip	Times of Departure & Return	Classes
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Emergency Contact Person #1	Day Cell or Phone Number
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Emergency Contact Person #2	Day Cell or Phone Number
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I, the parent/guardian of the student named above, hereby give my permission for my child to take part in the above trip. I agree not to hold the school or any employees of The Renaissance Charter School responsible for any expenses or injuries that may incur while engaged in the trip. I agree that in the event of an injury that the teacher in charge of the trip may act on my behalf in obtaining medical treatment for my child. I have indicated on the back of the form any permanent or temporary condition which should be known about my child.

If needed, I am available to chaperone on this trip.

I do NOT wish my child to attend this trip.

For High School Students Only:

- My child may return home unescorted.
- My child is to be escorted to the subway but may exit at his/her stop.
- My child is to be escorted back to school.

Name of Parent/Guardian (please print)

Signature of Parent/Guardian

Date