

TEANECK HIGH SCHOOL  
100 Elizabeth Avenue, Teaneck, New Jersey 07666  
TRIP PERMISSION FORM

Dear Parent/Guardian:

Date: \_\_\_\_\_

The CREW TEAM, a THS activity or department, has planned a trip to THE  
Name of Organization

STOTESBURY CUP REGATA on May 17-19, 2012 The students will go by Bus  
Destination Date Mode of Transportation

and leave Teaneck High School at 8:30 AM returning to school at about 7:00 PM. The students  
Time on Thu, May 17, 2012 Time on Sat, May 19, 2012

students will be under the supervision of Coaches Clemens Reinke & Sara Elmiligi  
Name of Sponsor

All students participating in the field trip must submit to a search of their hand luggage (including backpacks, pocketbooks, lunch bags, coolers, gym bags, school bags, and any other item carried by the student).

In the event that the supervisor of the field trip believes that your child is ill, has misbehaved, or may be in danger to him/herself or the others, then your child will have to return to school immediately. This will be accomplished by telephoning you to make arrangements for you to promptly pick up your child. If you cannot be reached or you cannot make arrangements to immediately pick up your child, your child will be returned to the school, by special arrangement, at your sole cost and expense. If you are not available to pick up your child from school at that time, your child may be brought to an emergency contact person you have designated, or, if necessary, to the Teaneck Police Department.

Your signature is needed to indicate your consent for your son or daughter to participate, based upon the terms outlined herein. In addition, your signature indicates that you consent to your child's property being searched.

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\_\_\_\_\_  
Name of Student Club, Group or Department

My child, whose name appears above, has my permission to go on a Teaneck High School field trip to

\_\_\_\_\_  
Place

I agree that the supervisor has the absolute discretion to determine if my child must be returned early to school because of illness, misbehavior or perceived danger to self or others. I agree that, in such event, I will make arrangements to immediately pick up my child, and I acknowledge that, if I cannot be reached by telephone, the supervisor has permission to make whatever special arrangements are necessary to immediately return my child to school, to the person I have designated as my emergency contact person, or to the Teaneck Police Department, if necessary. I agree that I will be responsible for all costs associated with such special arrangements including the cost of transportation and related personnel costs.

In addition, my signature on this permission slip acknowledges that my child's hand luggage (backpacks, pocketbooks, lunch bags, coolers, gym bags, book bags and any other item carried by my child) may be searched as permitted by law.

IN THE EVENT THAT MY CHILD MUST BE RETURNED EARLY OR MY CHILD'S PROPERTY IS SEARCHED, I HEREBY RELEASE THE BOARD OF EDUCATION, ITS EMPLOYEES, AGENTS AND THE TRIP SUPERVISOR FROM ANY AND ALL LIABILITY FOR DAMAGES AND COSTS OF ANY NATURE RELATED TO SUCH RETURN.

\_\_\_\_\_  
Signature of Parent Date

\_\_\_\_\_  
Telephone number where Parent/ Guardian can be reached during trip hours.

\_\_\_\_\_  
Name of Emergency contact Person and Phone #