

New York City Math Team Trip
Parental Consent Form

Organization: **New York City Math Team**
Destination: ARML, Penn State University
Time: **8:30am on Friday 5/29 to**
10pm on Saturday 5/30

Trip Date: **May 29th - May 30th, 2015**

Purpose of Trip: **Participate in a Mathematics Competition**
Contact Number for Eliza Kuberska on May 29 - 30, 2015: **(917) 280-2589**

On May 29th, 2015, the New York City Math Team is organizing a trip to Penn State University. Students will be given the opportunity to participate in the American Regions Math League Mathematics Competition. Please note:

- 1) The team will meet on Friday (5/29) at **8:30am** at NYU 251 Mercer St, NY 10012
- 2) The team will return to New York City via bus on Saturday (5/30) and arrive at the departure location at approximately **10pm**.

Note that students will be unaccompanied to and from their chosen departure location on Friday 5/29 and Saturday 5/30.

Students should bring with them the following items: snacks for the bus, layered clothing, math team t-shirt. Lunch and dinner on Friday 5/29 and breakfast, lunch and dinner on 5/30 will be provided.

I, _____, the parent / guardian of the student named below, hereby give my permission for my child to take part in the trip described above. I understand that the following conditions apply:

1. I am responsible for getting my child to and from the location departure at the times indicated above. I understand that my child shall otherwise be **unaccompanied** while traveling from home to the departure location, and from the departure location to home.
2. I understand that my child is expected to behave responsibly at all times and follow the usual school's discipline code and policies.
3. I agree that in the event of an emergency, injury or illness, the staff member(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child, after making a reasonable attempt to contact me.
4. I understand that it is within the NYC Math Team's discretion to change travel, accommodations and other arrangements as it deems necessary. I will be informed of such changes as soon as possible.
5. I understand that in arranging for my child's travel the NYC Math Team selected buses and other services whose performance and service cannot be controlled by the school. Consequently the NYC Math Team is not responsible for the actions of these commercial entities.
6. Additionally I understand that if a serious violation occurs while on the trip, it is within New York City Math Team's discretion to send my child home from the trip, after informing me.
7. I confirm that my child is medically fit and able to participate in the trip described above. I have indicated below specific activities in which my child may **not** participate:

8. I understand that as a parent, if I believe it is necessary to limit my child's activity to a great extent, then the school may not be able to accommodate my child on this trip and that I and my child will be informed of this decision as soon as possible upon the receipt by the school of this completed consent form.

9. I have indicated below any permanent or temporary medical or other condition(s) including special dietary and medication needs which should be known about my child:

10. I agree and understand that I am responsible for the actions of my child, and I release the New York City Math Team staff members from all claims and liabilities that arise in connection with the trip.

Please **sign, date**, scan and **email** this form to NYC Math Team at info@nycmathteam.org by **Tuesday, May 12th**, 2015. Without this consent form, students will not be permitted to accompany us on this trip.

STUDENT NAME (please print clearly): _____

PARENT/GUARDIAN NAME (please print clearly): _____

In an emergency, on May 29th - 30st, 2015, I can be reached at:

Phone Number: (___) _____

Alternate Contact: Name _____ Phone Number: (___) _____

(Signature of Parent / Guardian)

STUDENT DECLARATION

I have read the Parent Notification / Consent Form and I understand that I am to act on this trip in the same responsible manner in which I am expected to conduct myself in school. I understand that alcoholic beverages and/or illegal drugs of any and all kinds are strictly prohibited and that if I am found in possession of these substances, I will be subject to school disciplinary procedures and possible prosecution.

(Signature of Student)

(Date)

STUDENT cell phone number for duration of trip
(In case of emergencies)

NOTE: Additional trip information may be attached to this form based upon the unique circumstances of a particular trip. All other modifications require approval of the Office of Legal Services.

PARENT NOTIFICATION/CONSENT FORM

DAY TRIP

Name: _____ Class: _____

School (list additional trip sponsors when applicable): NYC MATH TEAM Trip Date: 5/29/15 - 5/30/15

Trip Coordinator: ELIZA KUBERSKA (NYC MATH TEAM)

Destination: PENN STATE UNIVERSITY

Departure Site: 251 MERCER STREET Departure Time: 8:30AM ON 5/29/15

Return Site: 251 MERCER STREET Return Time: 10PM ON 5/30/15

Mode of Transportation: ACADEMY CHARTER BUSES

Purpose of Trip: TO PARTICIPATE IN 2015 ARML (AMERICAN REGIONS MATH LEAGUE) COMPETITION

Specific Clothing/Equipment Required for this Trip: LAYERS

This trip will include the following physical and sports activities (e.g., swimming, horseback riding, ice skating, skiing, boating, etc.): N/A

a) I understand that there are risks of injury associated with the above-listed physical and sports activities and I consent to my child's participation in all these activities except for the following:

b) Please indicate below any permanent or temporary medical or other condition, including special dietary and medication needs, or the need for visual or auditory aids, which should be known about your child:

c) I agree that in the event of an emergency injury or illness, the staff member(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child.

d) I understand that my child is expected to behave responsibly and to follow the school's discipline code and policies.

- e) I agree and understand that I am responsible for the actions of my child. I release the school from all claims and liability that arise in connection with the trip, except if due to the negligence of school officials.
- f) I understand that I am responsible for getting my child to and from the departure and return sites identified above. I understand that my child shall be accompanied by staff member(s) during the trip, including while traveling from the departure site to the destination site, and from the destination site to the return site.
- g) I understand that alcoholic beverages and/or illegal drugs are prohibited and have discussed this prohibition with my child. I understand that if my child is found in possession of these substances, he/she will be subject to school disciplinary procedures and possible criminal prosecution.
- h) I understand that students who violate the school's discipline code may be excluded in the future by the school from participating in a trip.
- i) In an emergency I can be reached at: Day: (___) _____ Evening: (___) _____
Additional Contact: Name: _____ Day: (___) _____ Evening: (___) _____
- j) I give my permission for my child to participate in this school trip.

(Signature of Parent/Guardian)

(Date)

STUDENT DECLARATION

(to be signed by Middle School and High School students)

I have read this form and I understand that I am to act on this trip in the same responsible manner in which I am expected to conduct myself in school.

(Signature of Student)

(Date)