

Instruction

Field Trips - Day Trips and Overnight Trips (Curricular and Extracurricular)

Definitions

The school system allows for two categories of field trips:

Day Field Trips: Those in which students leave and return to school on the same day.

Overnight Field Trips: Those in which students are away from home and school within the geographic limits of the United States.

International Field Trips are covered in 6153.1 P/R.

Curricular Field Trips: Field trips that directly correspond to the grade level standards/courses offered by the Bethel Public Schools.

Extra-Curricular Field Trips: Field trips associated with athletics, clubs, and/or activities offered beyond the school day.

Parental Permission

Although the Board of Education has approved carefully planned field trips as part of the curriculum, it is necessary to inform parents in writing of the field trip and to obtain signed permissions for each student to participate. Its importance lies in the fact that the parent is fully cognizant of what the field trip entails.

Protection of Teachers, Employees, and Board and Commission Members in Damage Suits

"The Board of Education shall protect and save harmless any member of such board or any teacher, approved chaperone, or other employee thereof or any member of its supervisory or administrative staff from financial loss, and expense, including legal fees and costs, if any, arising out of any claim, demand, suit or judgment by reason of alleged death of any person, or in accidental damage to or destruction of property, within or without the school building; provided such teacher, member or employee, at the time of the accident resulting in such injury, damage or destruction, was acting in the discharge of his duties within the scope of his employment or under the direction of such board of education. For the purposes of this section, the term "teacher" shall include any student teacher doing practice teaching under the direction of a teacher employed by a town board of education."

(February, 1965, P.A. 330, S. 43.) (CGS-235)

Approval Process

The building principal must approve all curricular or extracurricular day field trips. The Superintendent must approve all overnight curricular and extracurricular field trips.

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General Guidelines for Field Trips

All proposals for day curricular or extracurricular field trips shall be submitted to the school principal who shall establish timelines and procedures. Also, the principal must assure that the following requirements are met prior to granting approval:

Guidelines for Curricular and Extracurricular Day Field Trips

1. The instructional outcomes of the curricular trip and activities are clearly connected to specific areas of the class/course curriculum. For extracurricular trips, the purpose is related to the club or activity. The purpose of the trip is educational.
2. All students in good standing in grades PreK-12 may participate in field trips.
3. Except in those cases where the Board of Education provides the transportation, no transportation expenses, including insurance, may accrue to the Board.
4. All trip costs are to be clearly explained to parents/guardians in advance of the trip. No student will be excluded from *curricular* field trips based on financial need. The Board of Education will not be financially responsible for any student expense for extracurricular field trips, regardless of student need. The Board will encourage the club or organization to provide scholarships for students who might need financial assistance with the cost of the extracurricular trip.
5. There shall be a minimum of one adult chaperone for every 6 students (or portion thereof) enrolled in grades PreK-3. Example: A day field trip involving 24 students shall have four chaperones; a trip involving 35 students shall have six chaperones.
6. There shall be a minimum of one adult chaperone for every 10 students (or portion thereof) enrolled in grades 4-8. Example: A day field trip involving 25 students shall have three chaperones; a trip involving 45 students shall have five chaperones.
7. There shall be a minimum of one adult chaperone for every 15 students (or portion thereof) enrolled in grades 9-12.
8. Under certain circumstances, the principal shall increase the number of chaperones.
9. Any adult chaperone attending a Curricular and Extracurricular Day Field Trips will need a signed copy of *the Field Trip, Adult Chaperone/Non-employee Conduct Agreement*. (Available on the [Field Trip Permission Form](#).)
10. When district transportation can not be provided, it is preferred that the child is transported by their parent/guardian. On rare occasions, it may be necessary for a parent

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or guardian to allow another individual to transport their child. On the field trip request form, the staff member, advisor, or coach will collect to whom the child can be released to in the absence of the parent/guardian prior to the trip or event. Staff must verify, through a license that the child is able to be released to the individual as reflected through parental consent on the form. The Board of Education requires that any Bethel Public Schools staff member transporting students in a private car hold a “Public Passenger Endorsement” on their driver’s license and complete a “Verification of Liability Insurance” form prior to the trip. The school principal must approve the use of private cars, and maintain a file detailing the approval.

11. If more than one class in the same building plans a day field trip to the same destination, consideration will be given to the coordination of all groups in an effort to maximize the use of transportation.
12. The principal and staff are responsible for communicating to parents and students that all Board of Education policies and administrative regulations will be in effect for all approved Curricular and Extracurricular Day Field Trips.

Guidelines for Curricular and Extracurricular Overnight Field Trips

The school principal is responsible for reviewing and recommending all proposed overnight field trips. In considering such a proposal, all of the general guidelines (above) will be assessed and verified for these trips. In addition, however, the following guidelines must be followed:

1. In order to provide ample notice to parents and students to assist them in preparing to meet any financial costs involved in out-of-state/overnight, each building principal will have field trip requests ready for approval as close to the beginning of the school year as possible.
2. The principal and staff are responsible for communicating to parents and students that all Board of Education policies and administrative regulations will be in effect for all approved overnight field trips.
3. The principal is responsible for assuring that every effort has been made to provide a relevant and stimulating learning experience and that all reasonable provisions are made for the safety of students.
4. The staff member(s) proposing the trip will hold an orientation session for parents and students at which time the specific written information on all of the following will be provided:
 - a. Educational purpose and curricular standards of the trip which are the major criteria for trip approval
 - b. Permission slip indicating parental approval and understanding of the trip’s purpose and details

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- c. Review of the *Trip Student Conduct Agreement* —including behaviors expected during meals, at accommodations, en route, during trip activities, and during “free time” and consequences students will incur due to inappropriate or unacceptable behavior
 - d. Responsibilities parents, students, and teachers/chaperones assume by participating
 - e. Full cost for travel, meals, accommodations, and other anticipated expenses (such as passport costs, etc.)
 - f. Schedule of payments for trip costs
 - g. Full explanation of any fund-raising expectations for the trip
 - h. Travel arrangements and overnight accommodations
 - i. Dates of the trip including the daily itinerary
 - j. Procedures for dealing with student medications/illness, accidents, and other travel emergencies
 - k. If applicable, health and other insurance coverage for the trip
 - l. Arrangements and responsibility for extra costs in the event a pupil should need to return home prior to the established date of return
 - m. Notification procedures for parents of any change in the expected time of return or unexpected changes in itinerary
 - n. Need for special equipment and/or clothing and shoes; required packing list
 - o. Packing tips and luggage limitations
 - p. Cell phone or other numbers for parents to call in case of family emergencies
 - q. If applicable, special trip cancellation insurance costs
5. The principal must assure that excessive class time will not be missed because of the field trip.
 6. Any persons not employed by the school district who participate in an overnight field trip, whether as an additional chaperone or not, must submit a criminal background check.
 7. Any adult chaperone/non-employee attending an overnight trip will be provided with a copy of the *Trip, Adult Chaperone/Non-employee Conduct Agreement*. (Available on the [Field Trip Permission Form](#).)
 8. Any student attending an overnight trip will need a signed copy of the *Trip, Student Conduct Agreement*.
 9. Any student who is scheduled to go on an overnight trip who withdraws from the Bethel Public Schools will not be able to attend the trip. Any financial loss from cancellation due to the withdrawal will be at the parent’s expense.

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(cf: Regulation 5141.21 and Health Services Department Nursing Protocol: Medication & Field Trips.)

Regulation approved:	December 7, 1992	BETHEL PUBLIC SCHOOLS
Regulation revised:	July 21, 1997, May 24, 1999	Bethel, CT
Regulation revised:	September 18, 2008, October 2, 2008	
Regulation revised:	October, 2017, January 18, 2018, April 20, 2023	

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Bethel Public Schools
OVERNIGHT TRIP
Student Conduct Agreement

My child _____ has my permission to participate in the _____ trip from _____ (tentative). This trip is school-sponsored and will be conducted under the supervision of [insert names of chaperones]. I understand that the trip will involve [insert activities of trip/purpose of trip]. **I understand that the trip is only available to students who are enrolled in the Bethel Public Schools at the time of the trip. My child and I understand that during my child's Bethel Abroad travel experience, my child will be representing Bethel High School, the State of Connecticut, and the United States of America.**

My child and I understand and agree to the following guidelines governing student conduct during the trip:

1. Students acknowledge that their behavior while abroad will reflect on themselves, their families, their teachers, their school, and their country, and they will thus conduct themselves appropriately and in a manner that is expected of every Bethel Public School student at all times in accordance with this Student Conduct Agreement.
2. Students will at all times follow all rules and instructions given by chaperones, the rules and handbook of Bethel Public Schools, and all Bethel Board of Education policies and regulations.
3. Students will at all times be respectful to tour guides, tour managers, bus drivers, chaperones, and all other individuals with whom the student comes into contact. Additionally, students will at all times be courteous in hotels/accommodations and on all methods of transportation.
4. Students will observe all arranged meeting times and curfews established by the rules of the trip and the chaperones. Students will at all times remain with a peer during free times and, after curfew, will not leave his/her own room. Students will at no time leave the hotel/accommodations individually or in groups after the group has checked in for the night, unless accompanied by a chaperone.
5. During sightseeing portions of the trip, the group will generally stay together. From time to time, the chaperones might agree to split into smaller supervised groups for certain defined periods of time, but at no time will any student be permitted to set off on his/her own.
6. Students will assume responsibility for their own belongings and will take special precautions to protect money, ATM/cash cards, and train and airplane tickets.

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7. Students will at no time operate a motor or motorized vehicle or purchase, possess, distribute, or use tobacco products or illegal drugs regardless of the legality of such purchase, possession, distribution, or use under local law.

8. Students will not purchase, possess, distribute, or consume alcoholic beverages, regardless of the legality of such purchase, possession, distribution, or consumption, or use under local law.

9. Students will at all times show respect for private and public property. Students will refrain from vandalism, willful destruction of property, and theft.

10. At the first sign of illness or injury, the ill student shall immediately contact a chaperone pursuant to the Medical and Illness Protocols.

11. Sexual or other harassment is strictly prohibited. If at any time during the trip, a student feels uncomfortable due to potential harassment by other students, chaperones, or others, the student must report such harassment to a chaperone immediately.

12. Consequences for violations of these guidelines may include but are not limited to: warnings, conference calls with parents, or being restricted to staying within visual sight of the chaperones at all times. Major violations, including, but not limited to, drug or alcohol violations, illegal acts, or chronic violations of rules and curfews, may result in the student being sent home immediately from the nearest airport, **with the student's parents assuming all additional transportation and associated costs** incurred in such a case, e.g. getting the student by rail/van to the nearest airport, and airline ticket. Determination of the level of violation is solely within the discretion of the administration and chaperones.

For the parent/guardian: I have thoroughly discussed the above Student Conduct Agreement with my child to ensure that my child fully understands the above rules regarding overnight travel with the Bethel Public Schools. Additionally, I have carefully read and understood the above Student Conduct Agreement and understand and agree that, if my child commits a major violation, as described in #12 above, I will be responsible for all costs associated with my child immediately being sent home to Bethel.

Parent/Guardian Signature

Date

For the student: I have thoroughly reviewed the above Student Conduct Agreement with my parent/guardian and agree and understand that I am responsible for conducting myself in a manner consistent with the Student Conduct Agreement. I understand that I may face discipline and/or be immediately sent home if I violate the Student Conduct Agreement, the law, or any of the rules, regulations, or policies of Bethel Public Schools, School, or the Bethel Board of Education.

Student Signature

Date

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Bethel Public Schools
INTERNATIONAL/OVERNIGHT TRIP
Medical Information and Protocols Understanding and Authorization Form

Student name: _____ Date: _____

Name of Primary Care Physician: _____

Office Address: _____

Phone number: _____ Fax number: _____

Date of Student's Last Physical Exam: _____

Emergency Contact Person: _____

Phone number: _____ Email Address: _____

Relationship of Emergency Contact Person: _____

Does this person have authority to make medical decisions for the student? _____

Secondary Emergency Contact Person: _____

Phone number: _____ Email Address: _____

Relationship of Secondary Emergency Contact Person: _____

Does this person have authority to make medical decisions for the student? _____

1. Does your child have any health conditions?

2. Is your child under any medical treatment?

(Please indicate name of treatment or medication, dosage, and directions for use.)

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3. Does your child have any allergies? (Please list foods, medications, or other allergies.)

4. If the answer to number 3 is yes, does your child have a prescription for an EpiPen?

5. Is there any medical restriction or other reason that would cause your child to be unable to participate in any part of the _____ **trip**?

6. You are strongly encouraged to purchase travel insurance for your child to cover accident, illness, and injury. Have you purchased travel insurance for your child that covers accidents, illness and injury while abroad? If so, please provide policy information below.

7. In order to participate on the _____ **trip**, you must provide us with the following:

a) a medical certificate from the child's physician certifying that your child is physically able to travel abroad, up to date with all scheduled immunizations, and is able to participate in all aspects of the _____ **trip** with or without reasonable accommodations; and

b) any necessary authorization forms for the administration of medication by school personnel, if necessary, including over the counter medications such as Tylenol. Please provide one form per medication.

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I have filled out the medical and emergency contact information section above fully, accurately, and to the best of my ability and I certify that there is no medical or health condition that I have not reported herein.

Parent/Guardian Signature

Date

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OVERNIGHT TRIP****Medical and Illness Protocols Understanding and Authorization**

1. At the first sign of illness or injury, my child will immediately alert one of the chaperones in person or by telephone of his/her medical or health status.
2. The chaperones will then promptly make arrangements for my child to receive medical care, which may be from a local doctor, dentist or other healthcare professional, or, in the case of an emergency, a hospital or urgent care center.
3. I further understand that the expense of any medical visit or medical transportation will be borne by me. If a chaperone pays for such medical care, I understand that I am responsible for promptly reimbursing such chaperone.
4. As soon as possible, I understand that the chaperones will attempt to contact me in order to discuss my child's illness and in order to consult me regarding medical decision-making. However, I understand that it may not always be possible to reach me or one of the emergency contacts listed above in a timely manner. In such cases, I authorize the chaperones to make medical and health decisions for my child in the best interest of my child. Such medical and health decisions include whether to hospitalize, secure proper treatment for, and authorize injection, anesthesia, or surgery for my child.
5. If I cannot be reached to discuss the medical decision and the chaperones must make a decision regarding my child's medical condition or illness, the chaperones will notify me of the decision at the earliest possible opportunity.
6. In the rare event that my child develops a serious illness or injury and must be evacuated back to Connecticut, I understand that I will bear the cost for such transportation and care of my child and any costs associated with doing so, including for chaperones who must accompany my child.

I have read and I understand the above Medical and Illness Protocols for the _____ **trip** and I have discussed these Protocols in depth with my child so that my child fully understands such Protocols. I agree to and authorize the use of such Medical and Illness Protocols for my child during his/her participation on the _____ **trip**.

Parent/guardian signature

Date

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OVERNIGHT TRIP

PARTICIPANT AND PARENT AGREEMENT (“Agreement”)

Including Acknowledgment and Assumption of Risks, Agreements of Release, and Other Provisions

Please read this Agreement carefully. It must be signed by the participant (“Participant”) if 18 years of age or older, or by the Participant’s parents or legal guardians (“Parent”), for travel programs sponsored by the Bethel Board of Education (“the Board”). This Agreement must accompany the Participant’s signed Student Conduct Agreement and Medical Information and Protocols Understanding and Authorization Form.

In consideration of the Board allowing the Participant to attend the travel program, the Participant or the Parent acknowledge and agree as follows:

Activities and Risks

The Board’s trip conducted in _____, includes a variety of activities in urban, suburban, and rural areas. A Participant is considered a “participant” in the program for purposes of this Agreement at all times, whether or not the activities are scheduled and supervised. Participation in _____ has risks, many of which are inherent – that is, they cannot be eliminated without adversely impacting the activity’s unique and instructional character. The Board does not want to reduce the Participant’s enthusiasm, but believes it is important for the Participant or the Parent to know in advance what to expect and to understand the nature of the risk of the activity. The inherent risks include, among others, the following:

The supervision provided by the Board in the various environments in which it conducts travel programs is not constant or total, and the Participant or the Parent have the responsibility for managing the risks to which the Participant may be exposed.

The Participant may be exposed to the conduct of third persons unknown to the Board and not under its control.

Equipment may fail or malfunction.

Travel may be by motorized vehicle, raft, kayak, aircraft, train, public bus, boat, ferry, bicycle, on foot, and by other means. Attendant risks include collision, falling, capsizing, drowning, and others associated with such travel, in addition to environmental risks.

Environmental risks and hazards include, among others, rapidly moving, deep and cold water; insects, including, but not limited to, ticks, snakes, and predators, including large animals; falling and rolling rock; lightning, avalanches, earthquakes, hurricanes, flash floods, and unpredictable forces of nature, including weather which may change to extreme conditions without notice. Risks and possible injuries and illnesses include hypothermia, frostbite, high altitude illnesses, sunburn, heatstroke, dehydration, and other mild or serious conditions.

The _____ **trip** may expose the Participant to animals, diseases and infections, laws and legal systems, and standards of medical care not common to our region. In addition, this Program may be subject to dangerous road travel, political unrest, acts of terrorism, riots, and demonstrations, and criminal conduct, including thievery and drug-related activities, and other conditions and occurrences

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with which the Participant may not be familiar.

These and other risks, inherent and otherwise, can result in loss or damage to the Participant's equipment, accidental injury, illness, and in extreme cases permanent trauma, disability or death. The staff of the Board is available to more fully explain to the Participant or the Parent the nature and physical demands of these activities and their inherent and other risks. Participant or Parent acknowledges that participation in the Board's travel programs is purely voluntary and not an educational requirement of the Board.

Acknowledgment and Assumption of Risks

Participant or Parent acknowledges and agrees that the travel program presents risks to the Participant and his or her property, that he/she has reviewed and understands the literature describing the program and the risks involved, and that he/she is responsible for evaluating those risks. Based on that understanding and evaluation, he/she agrees that the Board is not responsible for any injury, loss or damage to the Participant's person or property in connection with the travel generally and the activities associated with the program, whether resulting in acts or omissions of any person, except to the extent that the injury, loss or damage is caused by the gross negligence or willful misconduct of the Board, its officers, trustees, faculty, employees, agents or representatives. Participant and Parent have discussed the activities and risks, and the Participant chooses to participate nevertheless.

Agreements of Release

The Participant or Parent, and his/her heirs, executors, administrators, representatives, and assigns, hereby release and discharge the Bethel Board of Education (the "Board"), its officers, trustees, faculty, employees, agents, and representatives, (individually and collectively referred to as "Released Parties") from, and agree not to sue any Released Party for, any and all claims that may arise from the travel program, any accident, illness or injury arising from the travel program, any liability, and any damage or injury caused by the Participant's negligence or willful acts or any other participant's acts or omissions during participation in a travel program, except to the extent caused by the gross negligence or willful misconduct of the Released Party.

Additional Provisions

Participant or Parent have read and understand, in addition to this Agreement, general trip information, Student Conduct Agreement, and Medical and Illness Protocols.

Participant or Parent represents that medical professionals have verified that Participant has no past or current physical or psychological condition that might adversely affect his or her participation in these activities, other than as described on the Medical Information and Protocols Form. Participant is fully capable of participating in this activity, with or without reasonable accommodations, without causing harm to himself/herself or others.

The Board's staff members may obtain or provide emergency hospitalization, surgical, or other medical care for the Participant. In case of emergency, Participant or Parent understands that efforts will be made to secure proper treatment; and the Board, through its trip leaders, are authorized to administer aid and engage the services of a physician, dentist, or hospital if they deem it reasonable and necessary. In the case of medical emergency, the physician selected may hospitalize, secure proper treatment for,

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and order injection, anesthesia, or surgery for the Participant. The Board and any third-party medical care provider are authorized to exchange pertinent medical information. Efforts will be made to contact Parent and Emergency Contact in the event of medical emergency or serious illness involving the Participant, and to secure such person's consent prior to treatment. The cost of evacuation and such medical services, as well as any costs incurred by the Board's staff while accompanying the Participant, including lodging, transportation, and any costs related to rejoining the rest of the group, will be charged to and paid by Participant or Parent.

Participant and Parent understand that all participants in the trip must be enrolled in the Bethel Public Schools at the time of the trip. If Participant ceases to be enrolled in the Bethel Public Schools at the time of the trip, Participant's participation in the trip will not be permitted and any payments made by Parent or Participant shall be forfeited.

Participant or Parent authorizes the Board to use photos, videos, recordings, statements and written reports which may include the participant or be taken of or by the participant by the Board or others, in any manner the Board desires, for advertising, display, education, audio/visual or other use, and without compensation.

The Acknowledgment and Assumption of Risks, Agreements of Release, these Additional Provisions, and all other aspects of Participant's or Parent's relationship with the Board, contractual or otherwise, are governed by the laws of the State of Connecticut. Further, any suit, mediation, or arbitration arising out of or relating to Participant's enrollment or participation in this travel program or any other dispute with the Board or other Released Party must be filed or entered into, only in the State of Connecticut, and Participant or Parent consents to the jurisdiction of the Connecticut courts.

If Participant or Parent has any legal dispute with the Board or other Released Party which cannot be settled through discussion between the parties, they will attempt to settle the dispute by mediation before a mutually acceptable mediator whose name appears in the registry of names recognized by Connecticut courts as qualified persons for mediation assignments. To the extent mediation does not result in resolution, the dispute will be submitted to binding arbitration through the American Arbitration Association of Connecticut.

If any portion of this Agreement is found by a court or other appropriate authority to be invalid, the remainder of the Agreement nevertheless will be in full force and effect. This Agreement may not be amended except by written instrument signed by all parties.

Participant or Parent, has read, discussed with the Participant or his/her Parent, understands and accepts the terms and conditions stated herein, and acknowledges and agrees that this Agreement shall, to the fullest extent allowed by law, be effective and binding upon him or her, his or her respective heirs, assigns, personal representatives and estates, and all members of Participant's family.

PLEASE SIGN

PARTICIPANT SIGNATURE _____ AGE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

Instruction**Field Trips - Day Trips and Overnight Trips (Curricular and Extracurricular)****BETHEL PUBLIC SCHOOLS HEALTH SERVICES DEPARTMENT****FOR ALL FIELD TRIPS****AUTHORIZATION FOR THE ADMINISTRATION OF MEDICINES BY SCHOOL PERSONNEL**

The Connecticut State Law and Regulations 10-212(a) require a written order from an authorized prescriber (physician, dentist, advanced practiced registered nurse or physician assistant) and a parent/guardian authorization for a nurse to administer medication. The principal or trained staff may administer medication. Medications must be in pharmacy prepared containers and appropriately labeled. This law also applies to over-the-counter medications.

*****PLEASE NOTE: ONE FORM IS NEEDED FOR EACH MEDICATION*****

MEDICATION ORDER

Name of Child: _____

Address: _____ **Date of Birth:** _____

Condition for which drug is being administered during school hours: _____

Drug Name: _____ **Strength:** _____ **Dose:** _____ **Route:** _____

Time(s) of administration: _____ **If PRN, frequency** _____

Relevant Side Effects: None Expected **Specify:** _____

ALLERGIES: **NO** **YES, specify:** _____

Medication shall be administered from: _____ **to** _____

Month/Day/Year

Month/Day/Year

Student may self-administer: **Inhaler** **YES** **NO** **Epi-Pen** **YES** **NO**

Prescriber's Name/Title: _____

Prescriber's Signature: _____ **Date:** _____

Address: _____

Phone/Fax: _____

PARENT/GUARDIAN AUTHORIZATION

I hereby request that the above ordered medication be administered by school personnel. I understand that I must supply the school with no more than a 45-day supply of medication. I understand that this medication will be destroyed if not picked up within one week following termination of the order or the last day of school, whichever comes first.

Parent/Guardian Signature: _____

My child may self-administer: **Inhaler** **YES** **NO** **Epi-Pen** **YES** **NO**

Telephone (home) _____ **(work)** _____ **(cell)** _____

School Nurse authorization for student's self-administration: _____

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Inhaler YES NO **Epi-Pen** YES NO

School Nurse's Signature / Date