

Senior Class Grad Night at Universal Studios

June 7 – 8, 2019

\$85 Payable online <https://CoronadoHigh.myschoolcentral.com>
or to Mrs. Kirk in the Office during break or lunch.

- If paying online, **print your receipt** and attach it to your permission form.
- If paying cash, **bring the exact amount.**

All payments/receipts and permission forms must be turned in to Mrs. Kirk by April 9th.

Payment and a completed Permission Form is required for each student attending.

FIRM DEADLINE for payment and forms:

Tuesday, April 9th

Grad night tickets must be purchased in advanced.

Seniors will only be allowed to attend grad night provided they have cleared all detentions, Saturday Schools, and outstanding charges. Failure to clear these will result in not being able to attend Grad Night. **There will be no refunds issued in these instances.**

It is the responsibility of each senior to make sure all outstanding obligations are cleared well before the date of the trip on June 7th.

Senior grad night events are recreational activities offered by the school that are not a part of the actual graduation ceremony or any other educational activity. Attendance is optional and a student's decision to attend/not attend will have no impact on a student's right to participate in the graduation ceremony.

\$85 payable online or at Student Store.
DEADLINE: April 9th

Senior Grad Night Permission Form

To give your child permission to attend, please complete and return the bottom portion of this form.

Part 1 – To be completed by the teacher.

School: Coronado High School Date(s) of Trip: June 7 – 8, 2019

CUSD Employee-in Charge of trip: Nathan Aldworth

Group/Class/Organization: Senior Class of 2019

Departure Date/Time: June 7 at 1:00 p.m. Return Date /Time: June 8 at 5:00 a.m.

Destination: Universal Studios, Los Angeles

Transportation Plan: Charter Bus

Justification and Description of Field Trip: Senior Grad Night Trip

In case of emergency, your child can be contacted via district cell phone at: 858-442-5128

Part 2 – To be completed by the parent/guardian and returned to the teacher.

Student's name: _____
Last First

In case of emergency, please contact us or at one of the following numbers (At least two numbers required):

Primary contact number (Required):

Name Relationship () Area Code Number Home/Work/Cell/Beeper

Second contact number (Required):

Name Relationship () Area Code Number Home/Work/Cell/Beeper

The person in charge of this field trip should be aware of the following medical conditions, medications, allergies or special circumstances with regards to my child. (If you would like a certain physician notified please include name and numbers where he/she can be reached.)

District policy does allow for the transportation of students in private vehicles driven by teachers and parents. I do ___ do not ___ give my permission for my child to be transported by teachers or parents driving private vehicles. Parent Initials _____

- I authorize officials of Coronado Unified School District to contact directly the persons named on this card and, if so named, I authorize the above physician to treat my child if necessary in an emergency.
- In the event that physicians, other persons named on this card, or parents cannot be contacted, the school officials are authorized to take whatever action is necessary in their judgment for the health of my child. I will not hold the school district financially responsible for emergency care and/or transportation.
- I understand that my student is subject to all school rules as well as the rules of the hosting institution. In the event of an infraction, I may be required to pick up my student at the location of the field trip.
- I understand that if my student violates any school rule involving drugs or alcohol while on a field trip that, as prescribed in the Discipline Action Guide, he/she will be referred to the School Board for an expulsion hearing. And I will be notified and required to pick up my student at the location of the field trip.

If this Field Trip encompasses the lunch hour a sack lunch may be purchased from CUSD Food Services at the same cost as a regular school lunch. This form must be returned to the supervising staff member 72 hours prior to this trip if a CUSD sack lunch is desired. I do ___ do not ___ want to order a CUSD sack lunch.
Cost will be charged to your student's lunch account.

Signed _____ Date _____
Parent/Guardian

Signed _____ Date _____
Student