Mt. Diablo Unified School District NORTHGATE HIGH SCHOOL FIELD TRIP PERMISSION SLIP

I grant permi	ission for my child/w	/ard: TYPE or Pr	int (legibly) Name of S	tudent		
to participate	•	•	•	•	uiting Presentation · 26, 2009 1:38pm – 2:3	30pm
Approx. time	scheduled to return	to school: St	tart—1:07pm	Return to Ni	IS—2:45pm	
Class or gro	up attending: Mai	rching Band a	and Auxiliary			
Name of tead	cher and Educationa	l purpose: <u>G</u> [REG BROWN	/ Ben Loome	Recruiting Presentati	on
Method of tra	ansportation: Pri	vate Car				
Student's sp	ecific medical needs	s, if any:				
Name of med	dical provider:			phone numbe	er:	
Emergency i	notification phone fo	or parent(s) or gu	uardian(s):			
Home Work Cell						
Alternate em	ergency name & tele	ephone number:				
medications I HAVE READ KNOWLEDGE AT: http://no This includes NOTE: I UNI	AND HEREBY CERTIF I FURTHER AGREE 1 orthgatehs-pfc.com/r the WAIVER OF CLAIM DERSTAND Student dr	TY THAT THE ABO TO THE TERMS AI DIMD.html (Go To M & THE STUDENT DIVERS MAY NOT tra	OVE-LISTED INFORIND CONDITIONS LIST OF FORMS) or http: T'S PERMISSION TO INSPORT AND OTHER SERVICES IN TO INSPORT AND OTHER SERVICES IN THE IN	MATION IS CORR STED ON <u>PAGE2</u> //www.mdusd.k1 O DRIVE TO AND tudent to or from	ECT TO THE BEST OF MY OF THE ONLINE PERMISSION 2.ca.us/ogc/pdf/permissionhig FROM THE DESTINATION. the field trip location. IF I allow my child to drive him/	SLIP h.pdf
Parent/Guard	dian SIGNATURE:	K				
Parent/Guard	dian name (TYPE or p	rint legibly):				
T		Teacher Ackn	owledgement of	Student Absend	<u>e</u>	
Teacher Approval:	x		7-7:50a	Subject	Perio	od A
	x		7:55-8:4	3a Subject	Perio	od 1
	x			8a Subject	Perio	od 2
	X		(B) 9:53-10:4	1a Subject	Perio	od 3
	x		10:46-11	:34a Subject	Perio	od 4
	x		(L) 12:14-1:(02p Subject	Perio	5

_____1:07-1:55p Subject _

_ Period 6