



GOALS ♥ ACADEMY
TK-6th Grade, Free, Public Charter School
412 W. Carl Karcher Way, Anaheim, CA 92801
(714) 563-2390
A School Families Love!



March 4, 2019

Dear Parent/Guardian of Third Grader:

Field trips are an integral part of the learning experience at GOALS Academy. We are planning to go on a field trip to Mother Colony House, on March 27, 2019, and hope to collect donations to enable us to go. The donations that are collected will cover the transportation to take us to and from our destination, as well as any admittance fee. This is the schedule for this proposed trip:

- Departure from GOALS Academy at 9:00 am
- Arrival at Environmental Nature Center at 9:30 am
- Departure from Environmental Nature Center at 11:30 am.
- Return to GOALS Academy at 12:00 pm.

We are requesting that each scholar's family donates \$10 to cover the cost for the transportation and admittance fees. Here is a breakdown of how the money will be spent:

- Admittance Fee: Grant
- Transportation: \$10

Please send payment by March 22, 2019. This will allow me to know if we have enough donations to cover the cost of the trip. Without sufficient donations, the trip may have to be cancelled. Payments may be made by check to GOALS Academy, or by credit card using the Square that is available at the school office or the school website. Cash will also be accepted, and you will be provided with a receipt. More information regarding this field trip will be provided as the date draws near. Thank you for your help!

Sincerely,
Miss Tran
Third Grade Teacher



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**SCHOLAR'S PARTICIPATION IN VOLUNTARY FIELD TRIPS
 PARENTAL PREMISSION, MEDICAL, TREATMENT, ASSUMPTION OF RISK, AUTHORIZATION**

Date _____

Scholar's Name _____ has permission to participate in the following field trip.

Destination/Nature of Activity Mother Colony House

Person in Charge Tran and Harris Position Teachers School GOALS Academy

Departure Date 3/27/19 Time 9:00 am Return Date 3/27/19 Time 12:00 pm

Method of Transportation

- School Bus/Vehicle
- Walking
- Other _____

To Be Completed by Parent/Guardian

Health or special needs (Check as appropriate.)

- My child has no special health needs the staff should be aware of, and no medication is required on the trip.
- My child has a special need, and instructions are attached. Number of attached pages: _____.
- My child requires Medication.
 _____ Doctor's orders are on file in school office.
 _____ I will contact the school's office coordinator and make necessary arrangements.

In the event of illness or injury, I do hereby consent to whatever x-ray examination, anesthetic, medical, surgical, or dental diagnosis of treatment and hospital care and transportation considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services. I further acknowledge the GOALS Academy does not medical coverage for participants in this activity. I fully understand that participants are to abide by all the rules and regulations governing conduct during the trip.

As stated in California Education Section 35330, I understand that I hold GOALS Academy officers, agents, and employees harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity.

Scholar's Name _____ Grade Level _____

Signature of Parent/Guardian _____ Date _____

Print name of Parent/Guardian _____

Home Phone _____ Cell Phone _____ Work Phone _____

Family Medical Carrier _____ Policy # _____

(e.g., Blue Cross, MediCal, CalOptima, etc.)

In the case of an emergency, please contact:

Name _____ Relationship _____

Home Phone _____ Cell Phone _____ Work Phone _____