Itinerary to Hershey Park- Senior Trip

Friday, May 27, 2022

Class Sponsors: Melissa Duluc and Cameron Keuning

Class Administrator: Sean Rolon

7:30am-Students report to cafeteria for check in and light breakfast
8:00am- Buses depart for Hershey Park
1:00pm- Meet with chaperone at designated area for check-in
5:00pm- Check in with chaperone and head to buses for departure
5:30pm- Depart Hershey Park for Mclean High School
8:30pm-9:00pm Approximate return time to McLean High School

Seniors, if you are being picked up, please contact your ride so that they will be at MHS when we get back. More information about buses and signing up will be available closer to the date. To purchase tickets to Hershey Park, please pay on

www.myschoolbucks.com

School contact: 703-714-5700
Address of Hershey Park: 108 Chocolate World Way
Hershey Park, PA 17033

Forms Due: April 29, 2022 and please make sure all are filled out properly.

PLEASE RETURN THE 2 FORMS TO MS. RENEE YATES IN THE FRONT OFFICE
Field Trip Permission*
(This form is required for all field trips.)

Trip Date: 5/21/2022  
Teacher: Duluc  
Contact Number (during trip): 571-211-8492

Destination: Hersheypark, PA  
Area of Study: Senior Trip

Departure Time: 8:30 am  
Return Time: 8:30 pm  
Number of Students: 600

Purpose: To Celebrate Senior Class

Supervision (Check all that apply.)

☒ No Stock Epinephrine provided.  
☐ Students will be directly supervised by adults on this trip.
☐ Students will be directly supervised by adults on this trip with the following exceptions:

Transportation (Check all that apply.)

☐ Walking  
☐ School Bus  
☒ Commercial Carrier  
☐ Private Vehicle  
☐ Leased Vehicle  
☐ County Vehicle  
☐ None (provide own)

Drivers or Private or Leased Vehicle(s) (Check all that apply.)

☐ Student  
☐ Parent  
☐ Teacher/Staff  
☐ Other Adult

APPROVAL OF PRINCIPAL

Date: 5/1/2022  
Signature of Principal: [Signature]

PUPTL AGREEMENT

While participating in this field trip, I, ___________________________ (please print), will accept responsibility for maintaining good conduct and I will follow directions at all time.

Student Signature: ___________________________  
Date: __________

PARENT PERMISSION

I give permission for my child/ward ___________________________ to participate in the field trip described above.

Date: __________  
Signature of Parent/Guardian: ___________________________

SCHOOL ADDENDUM

Reviewed by Department Chairperson: __________
Reviewed by Director of Student Activities: __________
Reviewed by Department Administrator: __________
Reviewed By Testing Coordinator: __________
Student Medical flag list checked: __________

* Please return to Security Office when all initials are obtained.
PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISK FOR FIELD TRIP

(This form and an attached itinerary description are required for all field trips.)

IMPORTANT DIRECTIONS: (1) Use one form per trip, (2) Complete the school portion (top half) of form, (3) Duplicate one form per student, and (4) Send a copy home for parent and student signatures.

Date(s) of Trip
May 21, 2023

Destination
Hershey Park, Hershey PA

Purpose
Class of 2023 Senior Trip

SUPERVISION (Check one.)

☐ Students will be directly supervised by adults on this trip at all times

☒ Students will be directly supervised by adults on this trip with the following exceptions: Except while in park and on rides. They will have check-in times with chaperones during the day.

TRANSPORTATION BEING PROVIDED (Check all that apply.)

☐ Walking
☐ School Bus
☒ Commercial Carrier
☐ Personal Vehicle
☐ Leased Vehicle
☐ County Vehicle
☐ None

DRIVERS OF PRIVATE OR LEASED VEHICLES (Check all that apply.)

☐ Student
☐ Parent
☐ Teacher or Staff Member
☐ Other Adult
☐ Car
☐ Van (10 passenger or less)
☐ SUV
☐ Other

( Specify)

RISK RELATED (Check all that apply.)

☐ Swimming Pool
☒ Amusement or Theme Park
☐ Beach or Ocean
☐ Other

( List activity)

STOCK EPINEPHRINE (Check one) ☐ Will be available on this trip ☒ Will not be available on this trip

Pupil Agreement

While participating in this trip, I will accept responsibility for maintaining good conduct and appearance, and I will follow directions at all times.

Signature of Student

Date

Sign Here

PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISKS

I understand that participation in this trip is voluntary, that it is not required, and that it exposes my child to some risk(s). I also understand that the trip may include amusement activities and that participation in any amusement activities will expose my child to some risk of injury or even death. I have read and understand the the itinerary and authorize my child to participate in the planned components of the trip to the extent indicated by my signature below. I also understand that participation in the trip may involve activities on school property, therefore, neither the Fairfax County School Board, or its employees and volunteers, will have any responsibility for the condition or use of any nonschool property.

PARENT PERMISSION (Check all that apply.)

☐ Participation in all aspects of this trip.

☐ Participation in all aspects of this trip, except the amusement and theme park activities.

☐ Participation in all aspects of this trip, except the water-related activities.

☐ Other

I give permission for ___________________________ to participate in this field trip.

Signature of Parent

Date

Sign Here

IMPORTANT NOTICE Fairfax County Public Schools (FCPS) cannot be responsible for reimbursements to parents or students of money submitted as advance payment (e.g., for Broadway shows, transportation, or hotels) for any trip that FCPS cancels. It is strongly recommended that you personally review any tour company’s or commercial carrier’s contract, including its stated refund policy, BEFORE your child signs up or pays for the trip.