



December 13, 2007

Dear Parents,

As a member of the 4th grade class, your child will have an opportunity to participate in a unique field experience in the Florida Everglades. We have arranged a one day "environmental experience" with Florida Safari Adventures, Build-A-Field Trip for **Monday, January 14, 2008** and **Tuesday, January 15, 2008**. Two fourth grade classes will travel on Monday, and the other two on Tuesday.

Aboard an air-conditioned charter coach, students will engage in exciting learning activities while traveling to our destination, **Shark Valley, Everglades National Park**. The cost for this field trip is **\$70.00**. Experienced field instructors will work with the students throughout the entire trip making for an educational and enriching experience.

Please note that each child *must* bring a **labeled paper bag lunch** on this trip.

Attached is a "Things to Bring" sheet listing all necessary items.

We hope your child will be able to join us on this exciting one day "environmental experience."

Please send in the enclosed permission slip and check, payable to the City of Aventura with your child to their Homeroom teacher.

The deadline for payment is Wednesday, January 9, 2008.

Things to Bring

"Everglades Exploration" one-day

Clothing

To wear: T-shirt
Shorts
Closed shoes, No flip flops!

To bring: Sweatshirt for bus
Rain poncho
Hat

Other Items

Bag lunch (in a disposable paper bag- no lunch boxes or coolers)
Sunscreen
Insect repellent (cream or spray pump, no aerosols)
Camera and watch (optional- must be waterproof)
Water bottle (optional)

STUDENT/MINOR

BUILD - A - FIELD TRIP

Outdoor Education Field Study Release from Liability
Presented by FLORIDA SAFARI ADVENTURES, INC

Dear Parent/Guardian:

Your son/daughter/ward will be transported from the school to the field site. He/she may encounter risks during the course of the study that may be unlike those in or about the home or school. Build-A-Field Trip field instructors are very familiar with the area of study, take the utmost precautions and do their best to teach students about Florida's natural environment so they will know to take care of themselves outdoors. However, FLORIDA SAFARI ADVENTURES, INC. cannot be held responsible for inherent risks in the environment.

I am aware of the inherent risks and relieve FLORIDA SAFARI ADVENTURES, INC. of these risks.

I give permission for (Student's name) _____

To attend the education program called _____

on (date) _____ under the supervision of _____

_____ of _____
(teacher/class leader) (name of school/organization)

I agree to direct my son/daughter/ward to comply with all school and FLORIDA SAFARI ADVENTURES, INC. policies and cooperate with all authorized personnel in charge of conducting this field study program.

I hereby authorize and give full consent to BUILD-A-FIELD TRIP to copyright or publish all photographs, sound recordings or video recordings taken by them in which my son/daughter/ward appears. I further agree that they may use these photographs and/or recordings for all exhibitions, public displays, publications, commercial art, advertising purposes and all types of film.

I authorize BUILD - A - FIELD TRIP environmental education personnel in charge of this field study to arrange for professional care of my son/daughter/ward in case of a medical emergency and/or to administer first aid when necessary.

(signature of parent or guardian)	

(address/city/zip)	
Telephone (home) _____	(work) _____

REMEMBER THAT BOTH SIDES OF THIS FORM MUST BE COMPLETED AND SIGNED BY THE LEGAL GUARDIAN IN ORDER FOR THE LISTED CHILD TO PARTICIPATE.

STUDENT/MINOR

EMERGENCY TREATMENT RELEASE FOR MINORS

(if e) _____ being the legal parent (s)

and/or legal guardian of _____

(date of birth) _____, do hereby authorize ANY MEDICAL CENTER EMERGENCY

DEPARTMENT PHYSICIAN to medically or surgically treat the above listed minor. This permission is

in the event of my absence and with the understanding that an earnest effort has been made to contact me

(us).

Father's signature _____	date _____
Mother's signature _____	date _____
Or legal guardian signature _____	date _____
Witness (not necessary to notarize) _____	

BRIEF MEDICAL HISTORY

Child's name (please print) _____

Last tetanus/diphtheria booster _____

Allergies to drugs, food or insects _____

Special medications _____

Insurance company _____

policy # _____

PARENTS _____

ADDRESS _____

HOME PHONE _____

BUSINESS PHONE _____

EMERGENCY PHONE _____

CHILD'S PHYSICIAN _____

PHONE _____

Aventura City of Excellence School
Field Trip Permission Form

Student's Name _____ Telephone _____

I authorize my child to utilize the type of transportation identified below for this field trip

School Bus _____ Charter Bus X Private Vehicle _____

1. Field trip destination: **Shark Valley, Everglades National Park**

2. Departure Date/time: **January 14, 2008 - 7:00 AM**
OR
January 15, 2008 - 7:00 AM

- Return date/time: **SAME DAY - 4:30 PM**

4. Cost **\$70.00:**

Emergency Contact

In case of an emergency, I may be reached at:

Telephone/Beeper/Cell _____

In the event I cannot be reached, please contact:

Name of Establishment/Person _____ Telephone: _____

Health/Accident Insurance

My child is covered by twenty- four (24) hour students' accident insurance or family insurance:

Insurance Company _____

Policy Number _____ or I have attached a photocopy of my insurance identification card.

_____ I do not have insurance; however, I will pay any and all medical bills for emergency care of my child.

Signature of Parent/ Guardian

Date