



## Music in the Parks ITINERARY MAY 12th, 2018

*Please keep this information for future reference. All your questions regarding this event should be answered with the information below.*

Dear Parents and Guardians,

I cannot believe that we are in the last couple of months of our school year. I want to give you an itinerary of all of the events for our Six Flags' Trip on May 12th, 2018 (ADV ONLY). This is a fun trip and there will be a performance (part of their grade).

### **All students must report to the band room no later than 6:00 AM**

- 5:45 AM All students report to the band room. Each student should be dressed for the performance (Red Band Shirt, All black bottoms! Black Pants & Black Shoes) We will load all equipment on to the busses and depart as soon as possible. **BUS DEPARTS NO LATER THAN 6:00 AM!!!!**
- ~8 AM Arrive at Rio Norte High School (28771 RIO NORTE DRIVE, Santa Clarita CA 91354)
- 8:25 AM Check In & Head to Warm-Up Room
- 8:50 AM Advanced Band performance. Following the performance they put away all equipment and board the bus for the ride to Six Flags Magic Mountain.
- 9:30 AM We should arrive at Six Flags by this time. **THE RED BAND SHIRT MUST BE WORN THROUGHOUT THE DAY!!!** Tickets will be distributed at this time. All students are on their own for lunch and dinner. Please bring money or food with you.

*ALL STUDENTS MUST REMAIN IN GROUPS OF THREE OR MORE THROUGHOUT THE DAY. STUDENTS FOUND ALONE OR WITH ONE OTHER STUDENT WILL SPEND THE REST OF THE DAY WITH A CHAPERONE!*

- 6:00 PM **We will meet outside the main gate at this time.** All awards will be presented in the "Six Flags - Golden Bear Theater." The awards ceremony is optional but please attend to be a representative and for pictures! Following the awards ceremony we will leave for Vista heights.
- 7:30 PM We are walking to our busses for our trip home.
- 9:30 PM **We are expected to arrive at Vista Heights at this time.**

*The children will be in Six Flags' all day so please plan on providing students with money for at least two meals. Food in the park can be costly (\$15-\$20 a meal), so you can also send pre packed food with your child, but they will have to carry it with them all day or pay for a locker. Also, it will be warm that day so they should bring sunscreen, water, and a hat (if they want).*

*Thank you so much for your continued support.  
Mr. Rodriguez*

# MORENO VALLEY UNIFIED SCHOOL DISTRICT

## VOLUNTARY EXCURSION/FIELD TRIP WAIVER AND MEDICAL AUTHORIZATION FOR MINOR STUDENT

Dear Parent/Guardian:

Please complete and return one copy of this form as follows:

Return to: \_\_\_\_\_

Date form due: \_\_\_\_\_

\_\_\_\_\_ has my permission to participate in the following voluntary activity:  
(Student Name)

Destination: \_\_\_\_\_

Purpose: \_\_\_\_\_  
\_\_\_\_\_

Departure Date & Time: \_\_\_\_\_

Return Date & Time: \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

In the event of illness or injury, I do hereby consent to whatever X-ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

As stated in California Education Code Section 35330, I understand that I hold Moreno Valley Unified School District, its 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.

### **IMPORTANT – PLEASE READ CAREFULLY**

**I fully understand that participants are to abide by all rules and regulations governing conduct during the trip. Any violation of these rules and regulations may result in that individual being sent home at his/her parents' expense. If you wish to transport your own child, you must return a completed Release of Liability for Transportation form three (3) days prior to this activity.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Signature of Student \_\_\_\_\_ Date of Birth \_\_\_\_\_

Family Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Address \_\_\_\_\_

### **SPECIAL NOTE TO PARENTS/GUARDIANS:**

1. All medications must be registered on this form.
2. All medications, except those which must be kept on the student's person for emergency use, must be kept and distributed by staff.
3. ( ) Check here if there are NO special problems, allergies, or medical concerns that the staff should be aware of and NO medications are required on the trip.
4. If any medications ARE to be taken by the student, list them here.  
Name of medication and reason: \_\_\_\_\_
5. List any special medical condition or special needs here or attach a description of that condition to this form: \_\_\_\_\_  
\_\_\_\_\_