Emergency Contact & Phone #



PARENT PERMISSION FORM

DIRECTIONS: Before any member of a club, class, or organization within the ASB can participate in a special trip or activity, this parent permission form must be completed and given to the advisor of the group prior to the date of the activity. Please note:

TRIP INFORMATION:

Phone Number

- 1. Under no circumstances should a student who has not returned a completed ASB parent permission form be permitted to participate in a special trip or special activity.
- 2. Under no circumstances should a student serve as their own driver, nor should a student or other non-adult be permitted to serve as a driver of a vehicle in which other students will be passengers.
- 3. Under no circumstances should a non-employee provide transportation for students without first completing an ASB Driver Certification Form and submitting it to the advisor prior to departure.
- 4. Under no circumstances should a school employee provide transportation for students without first completing an ASB Driver Certification Form and submitting it to the Director of Student Activities prior to departure.

FUNDRAISER INFORMATION: Your child has decided to sell items as a fundraiser to support activities.

- 1. Your child will have total responsibility for the product. If it is lost or stolen, he/she must pay for its value. If the debt is not paid, your child will lose certain privileges such as not receiving transcripts, attend ASB sponsored events, etc.
- 2. It is recommended that the student carefully count all merchandise that is checked out prior to signing for the product.
- 3. Full credit will be given to the student for any unopened merchandise returned to the advisor. Either the merchandise checked out to your son/daughter or the appropriate amount of money, must be returned by the end of the sale.
- 4. Money collected should be turned in exactly as collected. Please do not deposit to a personal account and write a check for the total.

CU	JRRENT DATE:	🗆 Special Trip 🗖 Special Activity
NA	ME:	ID #:
CL	.UB/ORGANIZATION NAME:	
AC	TIVITY:	DATE(s):
LO	CATION/DESTINATION:	
ΤY	PE OF TRANSPORTATION:	
TIA	ME & PLACE OF DEPARTURE:	
TIA	ME & PLACE OF RETURN:	
SUPERVISOR(S):		CELL #
		ow, you indicate to the authority of Cesar E. Chavez High School nter to attend or to participate in the activity described above.
	In case of an emergency, I authorize a rep	Cesar E. Chavez are to be adhered to by my son/daughter. resentative of Cesar E. Chavez to take my son/daughter to the initiate any medical attention deemed necessary by authorized
_	Parent/Guardian Signature & Date	Student Signature & Date

Nondiscrimination In District Programs and Activities

Cesar E. Chavez High School is committed to equal opportunity for all individuals in education. School programs and activities shall be free from discrimination based on gender, sex, race, color, religion, ancestry, national origin, ethnic group identification, marital or parental status, physical or mental disability, sexual orientation or the perception of one or more of such characteristics. The school shall promote programs which ensure that discriminatory practices are eliminated in all district activities. (BP 0410)

No Discriminacion En Progamas y Actividades Del Distrito

La Escuela Secundaria Cesar E. Chavez esta comprometida a la igualdad de oportunidades para todos los individuos en la educacion. Los programas y actividades escolares deveran ser gratuitos y libres de cualquier descriminacion basado en genero, sexo, raza, color, religion, ascendencia, origen nacional, identificacion de grupo etnico, estado civil o paternal, discapacidad fisica o mental, orientacion sexual, o la percepcion de una o mas de tales caracteristicas. La escuela debe promover programas que aseguren que las practicas discriminatorias sean eliminadas en todas las actividades del distrito. (BP 0410)