College Park High School
SENIOR PICNIC

Friday, April 17th, 2015
9:00am-1:45pm
Six Flags Discovery Kingdom, Vallejo

Please Print Name

(Seniors attending will check into their 0, 1, 2 period classes)

Requirements to attend College Park Event:

SENIOR PICNIC is a school-sponsored activity; therefore, the following school expectations and consequences will be enforced.

- Only currently enrolled CPHS students may attend SENIOR PICNIC. **ALL STUDENTS MUST RIDE THE BUS AND SECURED SHOES REQUIRED.**
- Students must have this form, front and back completed to purchase tickets for this event.
- Students are required to attend the duration of the event. NO EARLY DEPARTURES ALLOWED.
- No one may leave the event and return. No backpacks or large purses and water bottles allowed on bus.
- Students are expected to follow all school regulations while attending the SENIOR PICNIC.
- Any unlawful possession or use of any controlled substance will result in a 5 day suspension, a drug and alcohol workshop, and suspension from all extra-curricular activities (up to 90 days, not less than 45 days). Any student suspected of being under the influence of alcohol will be subject to taking a breathalyzer test administered by the local Police Department.
- If a student violates any school regulation, he/she may be confined to a special location and released to his/her parent or parent designee.
- Lunch will be served: All you can eat buffet/ hamburgers, hot dogs, mac and cheese, fresh fruit, ice cream, fountain colas and beverages.

Purchase tickets online at https://cphs-falcons.myschoolcentral.com for $50 w/ASB - $55 w/o ASB from March 9th - March 19th for $55, bring completed permission slip to the Treasurer to be placed on a bus. The last day to purchase your ticket is March 19th at lunch.

Student Signature ____________________ Date____

************************************************************************NO REFUNDS************************************************************************
Mt. Diablo Unified School District

HIGH SCHOOL FIELD TRIP PERMISSION SLIP

School Site: CPHS

*I grant permission for my child/student (name):

To participate in a field trip to: Six Flags Discovery Kingdom

On the following date: Fri. April 17, 2015

Time scheduled to return back to school: 2:30 pm

Name of teacher in charge: Mike Benstein / Scott Wood

Method of Transportation: School bus

*Student’s specific medical needs, if any:

*Name of Medical provider:

I HAVE READ AND HEREBY CERTIFY THAT THE ABOVE-LISTED INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER AGREE TO THE TERMS AND CONDITIONS LISTED ON THE REVERSE OF THIS PERMISSION SLIP.

*Parent/Guardian Signature:

*Parent/Guardian name & phone number (please print):

(Students who are 18 still need a parent signature for this field trip)

2 Emergency contacts on day of event:

Name: __________________________________ Phone #: __________________

Name: __________________________________ Phone #: __________________

*MUST BE COMPLETED: PLEASE COMPLETE BOTH SIDES OF THIS FORM

AFTER YOU HAVE PAID FOR THE SENIOR PICNIC, TURN IN YOUR PERMISSION SLIP TO THE TREASURER TO BE PLACED ON A BUS