Permission Slip for Cross Country Road Trip

| To: When: Time: Who: | Warren Dunes State Park, Sawyer, MI (269) 426-4013 Tuesday, August 16, 2016 Leave GHS at 5:30 a.m. 8/16, return to GHS approximately 6:30 pm Cross Country Team Members and Coaches |
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| Cost: | Money to buy a lunch, dinner, and/or snacks |
| zone, it will be the rest of the | e at Warren Dunes (2½ hour drive) at about 8:00 CST (Warren Dunes is in the Easter time e 9:00 am when we arrive) on 8/16. We will do a workout once we arrive at the Dunes and day is yours to enjoy. We will leave Warren Dunes at 3:00 CST (4:00 EST) to return to ossible stop on the way home for a bite to eat. The weather may dictate changes to our |
| Transportation | will be provided by school district school buses. |
| You must have registered for cross country and have a current physical on file to participate in this trip. This permission slip must be returned by Saturday, August 13 th . | |
| suit, towel, bla planning a sho (for lunch at the | g gear (wear your gear so you are ready to run when we arrive), change of cloths, bathing anket, beach chair, suntan lotion (block), sunglasses, hat, foot wear, personal effects (if ower and smelling good), Frisbee (or any other beach toys), snacks or food items, money he concession stand and dinner on the way home), and anything else you feel is important to y at the beach. If you don't want to purchase your food, you should bring this with you as |
| | CUT HERE |
| This is to certic | fly that has my permission to attend the Crosstrip to Warren Dunes on Tuesday, August 16 th , 2016. |
| I also do hereby absolve and release Geneva High School, its personnel, the GVXC Coaches and any others from any claims for personal injuries or illness, which might be sustained while he/she is en route to and from or during this activity. | |
| I authorize the coaches to secure the services of a physician or hospital in the event of an accident or illness, and I will provide for the payment of these costs. | |
| apply for the country that I am not t | and that proper conduct is expected. School rules as outlined in the student handbook will duration of this trip and will be enforced using school discipline procedures. I understand to leave the boundaries of Warren Dunes State Park. I know that I am not to go anywhere prefore I agree to always be accompanied by someone on the coaching staff and/or a r(s). |
| Student Signature | |
| Parent/Guardian Signature | Phone Emergency Phone or Cell or other phone numbers |