

# Jefferson County Public Schools

## ACTIVITY PERMISSION FORM

I hereby permit \_\_\_\_\_

to go to \_\_\_\_\_ See Below \_\_\_\_\_ on \_\_\_\_\_ See Below \_\_\_\_\_  
(place) (date)

He/She will be transported by:

School bus

Fee required  N/A

Private car \_\_\_\_\_

Other needs \_\_\_\_\_

Walking \_\_\_\_\_

Transportation is the responsibility of the parent \_\_\_\_\_

Other \_\_\_\_\_

(specify)

Date \_\_\_\_\_

Signed \_\_\_\_\_

Parent/Guardian

**PLEASE RETURN THIS FORM BY:** \_\_\_\_\_ August 24, 2018

### Evergreen High School Marching Band Dates

#### September 2018

|      |           |         |  |
|------|-----------|---------|--|
| 7th  | Friday    | 7:00pm  | Football Game at EHS   |
| 21st | Friday    | 7:00pm  | Homecoming Football Game at EHS  |
| 19th | Wednesday | 5:00pm  | Jeffco Marching Band Competition at JeffCo Stadium                     |
| 29th | Saturday  | All Day | Friendship Cup Marching Festival<br>at Prairie View HS in Henderson CO |

#### October 2018

|      |          |         |   |
|------|----------|---------|---|
| 5th  | Friday   | 7:00pm  | Football Game at EHS  |
| 6th  | Saturday | All Day | Legend Band Competition<br>at Echo Park Automotive Stadium in Parker              |
| 15th | Monday   | TBA     | Denver Metro Regional MB Competition<br>at Echo Park Automotive Stadium in Parker |
| 19th | Friday   | 7:00pm  | Football Game at EHS  |
| 29th | Monday   | All Day | State Marching Band Championships<br>at CSU Thunderbowl Stadium in Pueblo         |

#### November 2018

|     |        |        |                      |
|-----|--------|--------|----------------------|
| 2nd | Friday | 6:00pm | Football Game at EHS |
|-----|--------|--------|----------------------|

**Jefferson County Public School  
Domestic/International Overnight  
Travel Emergency Form**

I, \_\_\_\_\_, being the parent or legal guardian of \_\_\_\_\_, give my consent for emergency medical and surgical treatment in a licensed hospital by a licensed physician should his or her condition require it in my absence. I understand that in such a case, reasonable attempts would first be made to contact me, time and conditions permitting.

As long as the medical or surgical treatment considered necessary in the situation is in accordance with generally accepted standards of medical practice for the particular type of injury or illness involved, I impose no specific prohibitions regarding treatment unless stated here (if none, so state).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In consideration for my daughter/son going on the see attached permission form trip, I hereby release Jefferson County Public Schools and its personnel from any legal claim arising from the administration of medication and the administration of emergency medical treatment:

**Verification of medical insurance:** Include a copy of insurance card (must show name and policy number).

**If a student does not have medical insurance**, sponsor must contact the Risk Management Department to purchase a **"Tripster" Policy**.

This authorization is for the time period beginning August 24, 2018 and ending May 31, 2019.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date