

Oregon City High School **DAY TRIP**/Activity Permission Form

Student Name:					
Has permission to participa	ite in: <u>Intern</u>	ational :	Seminar	Unity	Conferenc
Date of Activity:	rsday, Fe	6.27,2	020	,	
Place of departure: CCC	-gregory	Forum	_ Time of depar	ture: 7:40) AM
Place of return:					
I give my permission for my is responsible for the best violations of the Oregon disciplinary actions.	representation of th	he School Distric	t through his/h	er actions and	manners. Any
Signature of parent/guardian			Phone Number		
Emergency Contact			Phone Number		
Signatures are needed from office is not required for the arise. Students are respons	nose classes, but stud	ents are to retain	n a signed copy	of this form in	
Student Name:Acti		ity Date:			
Approve Early Bird	Disapprove	Teacher		Comr	nents
Period 1					
Period 2					
Period 3	-				
Period 4					····
Period 5					
Period-6-				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Student attended activity?	YES NO Spons	soring Teacher			ist 2/08