

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

Student Name:				
Has permission to part	icipate in: <u>Internatio</u>	onal Seminar Unity	y Conference	
Date of Activity: <u>Tu</u>	esday, Februar	y 27, 2018		
Place of departure:	CC- Gregory For	Time of depart	rure: 7:40	
Place of return:		Time: of return		
is responsible for the	best representation of the	cipate in the above trip/activity e School District through his/he de of Conduct will result in s	er actions and manners. Any	
Signature of parent/guardia	an	Phone Number	Phone Number	
Emergency Contact		Phone Number	Phone Number	
office is not required f	from only those teachers or those classes, but stude	◆◆◆◆◆◆◆◆◆ whose class you will miss. An ad nts are to retain a signed copy of assignments missed during trip/	of this form in case questions	
Student Name:Acti		Activity Date:	vity Date:	
Early Bird Period 1	ve Disapprove	Teacher	Comments	
Period 2				
Period 3				
Period 4			•	
Period 5				
Period 6		8		
Student attended activ	rity? YES NO Sponso	oring Teacher	jsf 2/08	