

Central Square Middle School

Please Return With Payment
Due No Later Than **January 14, 2010.**

Please Print Legibly

Student's Name				Student Sex (please circle one)		
Student's House	One	Two	Three	Male	Female	
Street Address						
City, State Zip Code						
Home Phone Number						
Parent #1 Information	Name:			Relationship to Student:		
	Daytime Number:			Evening Number:		
	Cell Number:					
Parent#2 Information	Name:			Relationship to Student:		
	Daytime Number:			Evening Number:		
	Cell Number:					
Emergency Contact	Name:			Relationship to Student:		
	Daytime Number:			Evening Number:		
	Cell Number:					

Will medicine be brought on the trip? (please circle) YES NO

If yes, student must bring the "pink sheet" completely filled out by the parent and a medical professional. All Medications for the trip are to be brought in to the school the week prior to departure, and must be received by **March 2, 2010**. All medications must be in the original container and labeled with the student's name. The only medicine that student will be allowed to carry with them is an inhaler. The inhaler must be listed on the pink medication sheet. No other medicines should be carried on the student.

Rooming Preferences

Please list yourself and one other roommate OR list yourself and three other roommates. Please do not list yourself and two other roommates – We need to put four people in one room. Thanks for your cooperation.

Below I have listed the student(s) name(s) that I would like to room with while on the Eighth Grade Trip. I have talked to them and we agree we are able to work together on any issues that may pop up and I feel comfortable rooming with them. I understand that every attempt to keep my roommates together in my touring group will be made and my parents feel comfortable with these choices.

Student Name	House

I also understand that if a problem or situation arises at any point in the trip, I may have to have my rooming situation changed at the recommendation of an administrator.

Student Signature: _____ Parent Signature: _____