

The Browning School

College Trip Permission Slip

I give my son, (full name)

_____ permission to go on The Browning School College Trip from September 13-15, 2017. The chaperones will be: Mr. Pelz, Mr. Reynolds, Mr. Qureshi, and Mr. Iwelu. We will be staying at the Embassy Suites in Marlborough, MA. The time of departure from the School will be 7:30 AM Wednesday, September 13. Return to Browning from the trip will be at approximately 7:00 PM Friday September 15. He may be dismissed from school at that time.

Parent's Signature _____

Please provide the following information:

Parent's Name: _____

Home

Address: _____

Phone: Home: _____ Work: _____

Family Physician: _____ Phone: _____

Describe any health-related problems your child has that we should know about.

List any foods or medications that your son is allergic to:

List any medications that your son is currently taking:

Do we have your permission to administer non-aspirin pain reliever, if needed?

Yes ____ No ____

Please provide the name of an individual who may be contacted in an emergency, if you cannot be reached:

Name: _____

Address: _____

Phone: _____

Relationship: _____