



REUTHER MOVIE NIGHT @ EMAGINE THEATRES

**In Celebration of Women’s History Month
Please join us in watching the highly acclaimed movie
‘Hidden Figures’**



**ROCHESTER COMMUNITY SCHOOLS
FIELD TRIP TRANSPORTATION
PARENTAL/GUARDIAN CONSENT FORM**

METHOD OF TRANSPORTATION

_____ District Owned or Leased Vehicles ___X___ Non-District Owned Vehicles

Field trip transportation for Rochester Community Schools students may be provided using District owned or leased vehicles, private transportation, parent/guardian drivers, or student drivers.

MEDICAL TREATMENT

If any emergency medical procedures or treatment are required during the field trip, I consent to the field trip coordinator taking, arranging for, and consenting to the procedures or treatment in the coordinator’s discretion. I will pay the costs of any such medical procedures or treatment.

WAIVER OF LIABILITY

I release and waive any, and further agree to indemnify, hold harmless or reimburse the Board of Education, the individual members, agents, employees and representatives thereof, as well as field trip coordinators, from and against, any claim which I, any other parent or guardian, any sibling, the student, or any other person, firm or corporation may have or claim to have, known or unknown, directly or indirectly, for any losses, damages or injuries arising out of, during, or in connection with the student’s participation in the trip and related activities or the rendering of emergency medical procedures or treatment, if any.

I hereby give permission for my son/daughter _____ to participate in the following school sponsored field trip to Rochester Hills Emagine Theatres.

Field Trip Date: **Wednesday, March 29th**

Check In:
3:15pm

Movie Begins:
3:45pm sharp

Movie Ends:
5:55pm

Field Trip Coordinator: Mrs. Prashar & Mrs. Hoekstra

X Signature of Parent/Guardian: _____ Date: _____

Administrative Regulation – Instruction 2344 Form A

Revised: 2/6/06

In order to avoid delays, the theatre rep is asking for your selection ahead of time.

Please Check:

1. My Student will ONLY be purchasing a ticket (\$5) to view the movie _____.
2. My Student will be purchasing a ticket (\$8) to include Popcorn & a Drink _____.

Drink Selection:

Water _____ Coke _____ Sprite _____ Lemonade _____

Please return this permission slip to Mrs. Hoekstra (room 116) with money before school or during homeroom class by Monday, March 27th at the latest! Please contact Mrs. Prashar with any questions. She can be reached at: aprashar@rochester.k12.mi.us.

