

**GRAD NITE MEDICAL AUTHORIZATION
& EMERGENCY INFORMATION**

STUDENT'S NAME _____

Trip Destination: Disneyland Resorts, Anaheim California

Departure: 6/9/22 Time: 8:30P Return: 6/11/22 Approx. Time: 10:00am

TRANSPORTATION: Chartered buses.

PARENT/GUARDIAN TO COMPLETE EMERGENCY INFORMATION:

Parent/Guardian _____

Home # _____ Work # _____ Cell # _____

PLEASE CHECK THE APPROPRIATE STATEMENT REGARDING STUDENT'S HEALTH:

☐ My child has no known health problems.

☐ My child has the following health problems: _____

☐ All Medications **MUST** be Listed Here including Birth control and is required to be checked in before the trip in the label bottled with seniors name on it, only bring what is needed for the trip(leave other pills behind). No loose pills in baggies will be allowed.

(Please identify any medication that the student may need or will be taking during the course of this trip.)
ONLY bring what is needed for the trip: This is a Grad Nite and Disneyland Policy. All medicine **MUST** be checked in

PLEASE CHECK #1 OR #2 BELOW TO INDICATE DESIRED ACTION IN THE EVENT OF ACCIDENT OR EMERGENCY:

☐ 1. In the event of accident or emergency, when a parent/guardian is unavailable, I hereby authorize a representative of the PTSA to make such arrangements as he/she considers necessary for my child to receive medical/hospital care, including necessary transportation. Under such circumstances, I further authorize the physician named below to undertake such care and treatment of my child as he/she considers necessary. In the event said physician is not available at any time, I authorize such care and treatment to be performed by any licensed physician or surgeon. **THE UNDERSIGNED PARENT/GUARDIAN FULLY UNDERSTANDS HE/SHE IS RESPONSIBLE TO PAY ALL COSTS INCURRED AS A RESULT OF THE FOREGOING.**

Physician's Name _____ Phone # _____

Medical Insurance Name (Kaiser, etc.) _____ Medical # _____

☐ 2. I do not choose the above statement and desire the following action to be taken: _____

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____