

# Universal Studios

## 8th Grade Formal Bash

May 6th, 2022 GPA: 3.0+ Cost is \$80

This is an exclusive *8th grade only* event for Universal studios. Costs cover admission and transportation only. You may bring your own money to purchase food and merchandise.

There will be attractions, shows, and dancing. Hope to see you there.

We depart Mayfair Middle School at 2:40pm on Friday, the 6th and return at 1:00am, Saturday the 7th. Parents, please arrive at the parking lot on Allington by 12:45am to pick your child up.

3.0 gpa set by 4th quarter Progress Reports that are due on April 25th, 2022.

Please see Mr. Saunders (Room 905) or Mr. Fong (Room 106) for approval ***before*** paying

10 digit SID	
Student Name	
Student GPA	
Staff Name (Printed)	
Staff Name (Signature)	

Because we will be leaving at 2:40pm, you will need teacher permission in order to attend.

Period	Teacher	Subject	Approval
6th			

We can't wait to celebrate all the hard work and greatness you bring to Mayfair.

Thank you for being a Monsoon!

Brought to you by Mayfair Middle School ASB & WEB. Making Mayfair a place you want to be.

# Bellflower Unified School District STUDENT PARTICIPATION IN VOLUNTARY FIELD TRIP PARENTAL PERMISSION & MEDICAL TREATMENT AUTHORIZATION

**School:** Mayfiar Middle School      **Teacher:** Mr. Saunders      **Grade:** 8

**Destination:** Universal Studios, 100 Universal City Plaza, Universal City, CA 91608      **Date(s) of Trip:** May 6, 2022

**Special Instructions:** Bring own snacks or money to buy food. Theme parks are moving to no cash systems. Have pre-paid card.

**Type of Transportation:** District owned vehicles

Please be on time when picking up your child. Please arrive 15 minutes prior to the time of return listed below.

**Time of Departure:** 2:30pm      **Time of Return:** 1:00am      **Leaving from:** Mayfair      **Returning to:** Mayfair

**To be completed by Parent/Guardian**

\_\_\_\_\_, \_\_\_\_\_ has permission to participate in the following Field Learning Experience.  
( Student's Last Name)      (Student's First name)

**School:** Mayfair Middle School, 6000 Woodruff Ave, Lakewood, CA 90713      **Field Trip Location:** Universal Studios, Hollywood

**Release and Covenant Not to File a Claim**

I/We the undersigned, for himself and personal representatives, assigns, heirs, and next of kin, as well as for any minor for whom this Release and Covenant Not to File a Claim is executed, or that minor's personal representative, assigns, heirs and next of kin; hereby **RELEASES, WAIVES, DISCHARGES, AND COVENANTS NOT TO FILE A CLAIM** against the Bellflower Unified School District, its agents or employees, or the State of California for any injury, accident, illness or death occurring during or by reason of the field trip or excursion that is the subject of this authorization (Education Code Section 35330). The undersigned acknowledges that the field trip or excursion addressed by this release is completely VOLUNTARY. Attendance is not required by Bellflower Unified School District or any of its agents or employees. I fully understand that participants are to abide by all rules and regulations governing conduct during the trip. In the event of any illness or injury, I hereby consent to whatever x-ray, medical treatment authorization, anesthetic, medical, dental or surgical diagnosis and/or treatment and hospital care from a licensed physician and/or surgeon as deemed necessary for my child' s safety and welfare, I understand that the resulting expenses will be the responsibility of the parent/guardian. I understand this field trip may be canceled at any time for security reasons. In the event of such cancellation by the district, I accept any and all financial risks or penalties imposed by any of the vendors providing services for travel, accommodations, or other trip-related services as a result of cancellation.

***My signature below also signifies that I have counseled the student named above on proper conduct while enroute to and from, while attending the event described and I do hereby agree to take full responsibility for any improper conduct on his or her part.***

\_\_\_\_\_  
(Parent/Guardian Printed Name)      (Parent/ Guardian Signature)

Home Phone: ( \_\_\_\_ ) \_\_\_\_\_      Work: (\_\_\_\_) \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_ Student's Signature if 18 or over, or if emancipated minor \_\_\_\_\_

Medical Insurance Company & Policy Number: (e.g., Kaiser) \_\_\_\_\_

**If Parent/ Guardian is not available, please notify:**

**Name:** \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_ **Relationship** \_\_\_\_\_

**STUDENT COMMITMENT** My signature signifies that while enroute to and from, and while attending the event described above, I agree to engage in no improper conduct and to act at all times in a responsible manner.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_