

Please move all the way
to your right in the row
in which you are sitting,
leaving no empty seats.
Thank you

Washington DC 2018-2019

Preregistration Link – Busses will be filled on
first come, first served basis.



Departure/Arrival



- **Dates: Sunday, January 6th – Friday, January 11th**
- **Depart: Students should be at Swiss Point between 5:30pm and 6:30pm on Sunday. The bus will leave promptly at 7:00pm.**
- **Arrive: Parents should be at Publix on 210 Friday morning at approximately 9:00am. Any student without a ride home will be taken back to SPMS.**
- **Wear comfortable clothes for bus ride up. Warm**

Medication

- Medication will be checked in with the teacher chaperone for each bus.
- Medication must be in original packaging and in a Ziploc bag with child's name on the outside.
- Appropriate forms must be completed and are located on the SPMS home page.

Important Forms

- Acceptable Use Policy
- Code of Conduct
- Change of Address form
- Release Student Info
- Medication Authorization form
- Over the Counter Med Form
- Pre-Approved Absence Form



Medical Form - OTC

St. Johns County School District Health Services

Parent Permission for Student to Self-Administer Non-Prescription Medication

School Board Policy 5.15 – Administration of Medication During School Hours, states that “all prescription and non-prescription medication administered by the school at the elementary, middle and high school level must be directed by a physician who has determined that a student’s health and well-being requires medication during school hours. All non-prescription medication in the possession of students at the middle and high school not administered by the school requires written permission from the parent to the school.”

To comply with **School Board Policy 5.15**, parents/guardians are responsible for obtaining the Medication Authorization Form to be filled out by the physician if medication will be given by the school. For those students carrying Non-prescription; Non-emergency medications, the parent/guardian is responsible for completing the Parental Permission Form at the bottom of this letter.

School Board Policy 5.15 – Administration of Medication During School Hours, states that a student at the middle and high school level may carry a Non-prescription; Non-emergency medication on his/her person while in school with approval from his/her parent/guardian.

I give permission for the below named child to carry and self-administer his/her own Non-prescription; Non-emergency medication. I understand that my child may not share his/her medication under any circumstance and that a copy of this permission form must accompany the stated medication. I understand that if there is inappropriate behavior or a safety risk, **the privilege** of carrying his/her medication will be rescinded.

Student Name _____ Grade _____ Homeroom _____

Medical Form - Rx

ST. JOHNS COUNTY SCHOOL DISTRICT AUTHORIZATION TO ASSIST IN THE ADMINISTRATION OF MEDICATION/TREATMENT

Student's Name: _____ Date of Birth: _____

School: _____ Grade: _____ Teacher/Homeroom: _____

NURSING SERVICES AND MEDICATION/TREATMENT ORDER

ALL INFORMATION MUST MATCH THE PRESCRIPTION LABEL! All medication must be properly labeled and in original containers. Complete one form for each medication/treatment to be administered. A new form must be completed if the dosage of a medication changes at any time.

Nursing services are recommended for the care of this student during the school day.

It is necessary for the following medication/treatment to be given in school and during school sponsored activities. I am aware that non-medical personnel may administer this medication/treatment.

Name of medication/treatment: _____ Amount (Dosage): _____

Time to be given: _____ Date to start: _____ Date to end: _____

Health condition requiring medication: _____

Possible side effects: _____

Special instructions: _____

Physician ordering medication: _____

(Print)

Physician's address: _____

Physician's phone: _____ FAX: _____

Physician's signature: (required for all medications) _____ Date: _____

Medical Form - Rx

ST. JOHNS COUNTY SCHOOL DISTRICT AUTHORIZATION TO ASSIST IN THE ADMINISTRATION OF MEDICATION/TREATMENT

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Name of medication/treatment: _____ Amount (Dosage): _____

Time to be given: _____ Date to start: _____ Date to end: _____

Health condition requiring medication: _____

Possible side effects: _____

Special instructions: _____

Physician ordering medication: _____

(Print)

Physician's address: _____

Physician's phone: _____ FAX: _____

Physician's signature: (required for all medications) _____ Date: _____

Medical Form

MEDICAL INFORMATION FORM

(Required for any student requiring medication or medical attention)

Child's Name: _____

Date of Birth: _____

Health Insurance Provider and # of Medical Plan: _____

Doctor's Name & Phone #: _____

Parent's Contact Number: Cell: _____ Work: _____ Other: _____

If parents cannot be reached in an emergency, please contact:

Name: _____ Phone #: _____

LIST ANY AILMENTS, DISABILITIES OR PROBLEMS INVOLVING YOUR CHILD WHICH MIGHT AFFECT HIS/HER PARTICIPATION.

Asthma _____

Allergies _____

Bronchitis _____

Bed Wetting _____

Diabetes _____

Ear Infection _____

Epilepsy _____

Heart Disease _____

Nightmares _____

Sinus _____

Sleepwalking _____

Other _____

Medical Form

All medication and required documentation must be cleared through the **School Clinic** prior to the field study.

Name of Medicine: _____

What it is to be used for: _____

How it is to be given: _____ Quantity to be given: _____ Time to be given: _____

Parent's Signature _____

IN CASE OF EMERGENCY: I hereby request the physician/emergency team selected by the supervisor provide treatment for my child named above.

Name: (Print) _____

Parent's Signature: _____  **Date:** _____

Permission Form

**ST. JOHNS COUNTY SCHOOL DISTRICT
PARENT PERMISSION FORM FOR FIELD STUDY ACTIVITIES**

School: Switzerland Point Middle School

I/We, the parents/guardians of the student named below, understand the nature of the activity being planned to:

Washington, DC and Gettysburg, VA on 6 Jan - 11 Jan, 2019

Time: Leave: 7pm, Jan 6 Return: 9am, Jan 11 This field study includes a supervised water activity: Yes No

Bailey Tours, Inc at a cost of \$ \$935 student

(MODE OF TRANSPORTATION)

Permission Form

My student, by his/her signature hereto, fully agrees and consents to the foregoing with permission to participate in the listed field study.

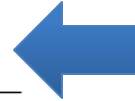
Student's Name (Print): _____

Signature of Student

Date

My student requires medication and/or medical attention: YES ___ NO ___

If yes, you must complete the Medical Information Form (obtained from the activity supervisor) and provide the medication to the personnel trained to administer the medication.



Signature of Parent/Guardian

Date

Cell Phone

Work Phone

Home Phone

Emergency contact, if parent unavailable _____

Phone _____

Family Physician _____

Phone _____

Health Insurance Provider _____

Policy# _____

Packing

- What you will need:
 - 2 bags (All bags will be checked by the drug do.
 - One large piece of luggage that will be stored under the bus containing warm clothing for **Tuesday – Friday.**
 - One small carry-on bag that will be kept on the bus containing warm clothing, medication, toiletries for **Monday.** We will change early Monday morning.
 - Wallet/purse for money. If needed, a draw string bag to keep souvenirs, medication, personal items.

Cost of DC Trip



Complete Google Form ASAP to hold seat

Total cost = \$935/student \$1035/adult

Payment plan for Students/Parents

\$485/\$535 Payment 1 - Sep 18th

\$450/\$500 Payment 2 – Oct 30th

Last day to request a full refund – November 1st

Partial scholarships and flexible payment plans are available, but parents must contact Katie Barnes or Kim Barker by Tuesday, September 4th.

Payment of DC Trip

- All Boys → Barnes (Room 355)
- All Girls → Barker (Room 365)

** All forms and payments must be given to the appropriate teacher***

Food

- Included in cost of the trip:
 - All meals (breakfast, lunch and dinner) while in D.C.
- Not included in cost of the trip:
 - Any snacks during the trip
 - Extra lunch money if student will spend more than \$10 at the food court.

Spending Money

- Depends on each child.
\$100 is appropriate.
DC sweatshirts are \$25.
- Keep it safe!
 - Wallet in front pocket/purse close to body
 - Visa gift cards or check cards work well
 - Do not keep all of your cash in one place
 - Don't flash your cash around

Bus Trip



- Bus Ride:

- The trip will take approximately **13 hrs (each way)**
- Stops will be made every 2 – 3 hours, and all students **MUST** get off the bus at each stop, so layers are recommend
- All busses will load, boys in the front, girls in the back (or vice versa) for both **13 hour trips.**

Bus Trip

- Food & Drink:

- Screw top beverages only
- Snacks are allowed unless there is a mess
- There is NO gum on the bus - \$500 fine from company!
- Keep the bus clean or snack privilege will be LOST
- **PLEASE** do not pack an excessive amount of candy. No energy drinks can be brought on the bus or purchased while on the trip.



Bus Trip

- Entertainment:

- PG-13, PG, and G rated movies will be played throughout the trip. If you bring personal movies or music, you must use headphones. No R or Mature movies will be allowed. Movie permission slips must be returned by all students.



Switzerland Point 2017-2018

8th Grade PG/PG-13 Permission Slip

Please return, with your DC permission form, to Ms. Robbins

At various times throughout the DC trip, students may watch a G/PG/PG-13 rated movie on the bus. The movies will primarily be played for entertainment purposes; however, we do have two brief films that will be shown for educational purposes.

Please sign this form to give your child permission to watch these movies.

Student's Name _____ Grade _____

Guardian's Name _____ Relationship _____

Guardian's Signature _____ Date _____

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Bus Trip



- Bus Lists:
 - Students will be placed on a bus the first week in November. The order in which students register, does not determine their bus. Busses will be filled based on room lists, male/female numbers, medical needs, and parent chaperone distribution.

Bus Trip



- Bus Lists:

- The number of busses taken is determined by the number of students that register. We need 48 students to register in order to take one bus. We will then need an additional 50 students to register to take a second bus, and so on. Registered students are placed on a waiting list until there are enough students for an additional bus.

Hotel

Holiday Inn

625 1st Street

Alexandria, VA 22314

- **Room Lists**
 - Sign ups will be in October



Hotel

- **There will only be one opportunity to get snacks/ice when we are at the hotel.**
- **Students will be taped in their hotel room 30 minutes after we arrive at the hotel each day.**
- **Security will be posted on each floor.**
- **Students MUST be able to carry all of their belongings to their room in 1 trip.**

Hotel Expectations

- We are not the only guests at the hotel. Students must be courteous to staff and the other guests.
- Students will be required to replace any damaged or broken items at the hotel.
- Students are only to use the elevators or the open stair case, **NO STAIR WELLS.**
- Students are **never** allowed to leave the hotel.
- Once students are taped in, they will be asked to use the chain lock, and the hotel door must remain closed until the morning.
 - Hotel doors may only be opened for chaperones.

Tour Locations

A nighttime photograph of the United States Capitol building in Washington, D.C. The building is illuminated with warm lights, and its iconic dome is prominent. In the background, the Washington Monument stands tall against a dark sky. The city lights of Washington, D.C. are visible in the distance.

- Mt Vernon, the home of George and Martha Washington
- National Archives Building
- Holocaust Museum
- White House
- National Cathedral
- Capitol Building
- Library of Congress
- Newseum

Tour Locations

- American History Museum
- National Aquarium
- Arlington National Cemetery
 - President Kennedy's gravesite
 - Changing of the Guard at the Tomb of the Unknown Soldier
- Battlefield Gettysburg
 - Virginia Memorial
 - Florida Memorial
 - Little Round Top

Tour Locations

A nighttime photograph of the U.S. Capitol building in Washington, D.C., with the Washington Monument visible in the background. The Capitol building is illuminated, and the sky is a mix of dark blue and purple. The Washington Monument is a tall, thin, white obelisk.

- **Memorials**
 - Lincoln
 - Korean
 - Viet Nam
 - World War II
 - Iwo Jima
 - Roosevelt
 - Martin Luther King

Tour Expectations

Students will be expected to:

- Listen to bus driver's instructions
- Pay attention when the tour guide is talking (no talking or headphones).
- Follow directions. If a sign says, or if a chaperone says, "Don't..," then **DON'T!**
- Remain in groups of 3 or larger at all times, even when going to the restroom.

Tour Expectations

Students will be expected to:

- **Understand that sometimes cell phones will not be allowed.**
- **Respect others, especially at memorials.**
- **Try to learn something new at each place.**

Pictures

- Use the following hashtag:
#spmsdc19
- Prizes each morning at breakfast for the best theme pictures posted each day.

Updates through Remind

- Text message updates
 - Open a text message in 'To' type: 81010
 - In the message box type: @3h7ag6
- Email updates
 - Send an email 'To' 3h7ag6@mail.remind.com

Washington DC 2019

