

WEST PALM BEACH ART FIELD TRIP

December 5, 2016

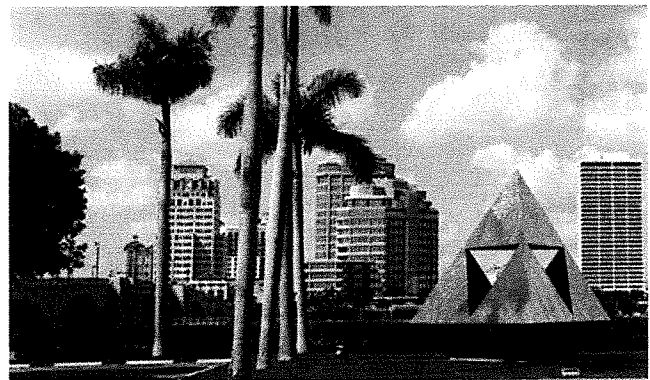
Dear Parent/Guardian(s),

We are excited to invite all our 8th grade students who are enrolled in an Advanced Art class to attend an overnight art field trip to West Palm Beach. We will be leaving Howard on a charter bus at 6am, January 5th and returning by 9pm January 6th. We will stay overnight at the Marriott West Palm Beach hotel. We believe seeing artwork in person is an important part of our student's education in the arts. We will be visiting the Society of the Four Arts, the O'Keeffe Gallery, and the Norton Art Museum during this trip.

Itinerary

Thursday January 5 (Charter Buses stay with group both days)

6:00am Bus Departs
9:30am Arrive West Palm Beach
10:00-12:00 Norton Sculpture Garden
12:00-1:00 Lunch (bring a bagged lunch)
1:00-4:00 Norton Art Museum
4:30 Check-in to hotel
5:00 Pizza night at hotel
7:00 Art after Dark
10:00pm Students in rooms



Friday January 6

7:00 Wake up call
8:00 Breakfast (provided)
9:00 Hotel Check Out
10:00-12:00pm Art and Poetry Workshop at the Children's Library
12:00-1:00 Lunch provided
1:00-3:00 Four Arts Botanical Gardens and/or visit the O'Keeffe Gallery Exhibition, "When Modern was Contemporary"
3:00-6:00 Travel home (bring a snack for the afternoon ride home or bring money)

The cost for this trip is \$100. This can be paid at <http://tinyurl.com/WestPalmArt>. This cost covers transportation, hotel room (4 students per room), dinner January 5th, breakfast and lunch January 6th. It does not cover dinner January 6th or souvenirs/spending money at the museums.

Please sign the form on the back of this letter and return to Ms. R. Buckley, Ms. Warskow, or Ms. V. King by **December 14**. Payment must be made at the link above prior to returning form.

Everyone attending this trip **must also join** this Remind group. Text **@WPART17** to 81010 or go to <https://www.remind.com/join/wpart17>.

Students are responsible for missed work in classes on both days. Please email rachel.buckley@ocps.net, clinton.mccracken@ocps.net, valerie.king@ocps.net, or kristen.warskow@ocps.net if you have any questions.

Sincerely,

Mr. McCracken, Ms. Buckley, Ms. V. King, Ms. Warskow

2016-2017 Activity Permission Slip



As parent or legal guardian of _____,
(student name as registered with OCPS)

I hereby give my permission for my child/ward to participate in the following activity/activities (hereinafter "this activity"):

WEST PALM BEACH VISUAL ARTS FIELD TRIP,
(place, detailed type of activity, and purpose)

scheduled for JAN. 5, 2016 – JAN.6, 2016,
(month, date, year and duration)

I and understand that his/her participation is voluntary.

I acknowledge and understand that there is some risk involved in my child/ward participating in this activity. In consideration, I, the undersigned, on my own behalf and on behalf of my child/ward, forever release Orange County Public Schools, the School Board of Orange County, Florida, and any and all employees, agents, and volunteers from any liability for medical expenses, disability, death, disfigurement, lost wages, diminished earning capacity, mental anguish, and emotional distress arising from this activity.

I acknowledge that I have been informed that this activity may have rides that may have health warnings on them, such as roller coasters and other fast motion rides, and/or may involve water. I confirm that my child's/ward's records on file with OCPS are current with regard to any medical condition(s), physical condition(s), vaccinations, and limitations, and affirm that he/she has no condition that would preclude him/her from participation in this activity.

I understand that the School Board of Orange County, Florida and Orange County Public Schools are self-insured and do not carry insurance coverage for student accidents and injuries, including death. I further agree that any insurance I may carry on myself and my child/ward shall be primary and/or I will make arrangements, prior to this activity, to purchase student accident insurance to ensure insurance is available for my child/ward for the duration of this activity.

I acknowledge and authorize that my child/ward will be transported to, from, and during the above-mentioned activity. I understand that OCPS may or may not be providing transportation using OCPS vehicles. In accordance with OCPS Policy EEAG, each child's/ward's parent or guardian shall give prior written consent (Authorization and Request for Transportation of Student in Privately Owned Vehicle and Release of Liability Form) to the transportation of a child/ward in a privately-owned vehicle. I further release the School Board of Orange County, Florida and Orange County Public Schools from any claim arising out of the transportation of my child/ward by me, my child/ward, other student, or third party.

Parent Signature

Date

Parent Name (printed)

School Name