

## GRAD BASH 2022-2023 PERMISSION FORM

Please return completed forms (be sure to include Insurance and Policy number). Return the forms with your \$215 (cash, check or money order) payment. Checks should be made out to “Lincoln High School”, with a current phone # and address listed on the check and “Grad Bash” written in the memo line. Grad Bash payments will start November 8 – November 11, 2022 in Guidance.

### Itinerary:

#### Friday, April 21, 2023

- **11:30 am** – Seniors arrive at Lincoln to load buses. Please arrive at this time, all seniors will be searched before boarding busses, and dress code will be checked – breakfast provided; secure parking will be provided in the Back Junior/Sophomore Parking Lot (by old Driver’s Ed Range/Portable)
- **12:00 pm** – Buses leave Lincoln
- **2:00 pm** – Stop at rest area (SNACKS/DRINKS PROVIDED)
- **2:30 pm** – Load buses
- **4:30 pm** – Arrive at Universal Orlando for Grad Bash Mix-in at Universal Studios
- **7:00 pm** - 8:00 pm - Enter Grad Bash 2022 at Universal Studios and Islands of Adventure.

#### Saturday, April 22, 2023

- **2:00 am** – load buses for return trip (SNACKS/DRINKS PROVIDED)
- **7:00 am** – arrive at Lincoln. **Please have your transportation from school ready by 6:45 AM.**

#### GRAD BASH GUIDELINES:

- It is the responsibility of the student and parent to notify Lincoln if any information listed changes.
- Students must follow Universal Orlando dress-code standards (see below)
- Students may not board buses with any food, drinks, candy, gum, lotion, make-up, lip gloss, hand sanitizer, or medicine (unless prescribed and listed in medical area of this form).
- Students must bring headset to accompany electronic/listening devices.
- Students may not bring backpacks.
- Students must use transportation provided by the school.
- Use or possession of drugs or alcohol, or unacceptable behavior during any senior event will result in school suspension and inability to participate in Convocation and/or Graduation ceremonies.
- **Students must be in good standing (ex. - behavior, academics, attendance, fees) in order to attend Grad Bash. Any student suspended from school, having unpaid school fees, or any attendance failure from 11/8/2022 until 4/21/2023 will forfeit their participation of Grad Bash, and refunds will only be provided if additional students wish to attend.**

#### GRAD BASH DRESS CODE:

- School dress code applies. No school (high school), city (area codes).
- DO NOT WEAR TANK TOPS WITH STRAPS LESS THAN 2”!
- Bags, purses, packs no larger than 8.5” x 5.5 ” (size of a half sheet of paper).

**Be sure to complete Permission Form on the Back AND LCS  
Activity Permission Form**

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Student Name (please print): \_\_\_\_\_ Parent Name: \_\_\_\_\_

Student Contact Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent Contact Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

List any medical problems (allergic reactions, illnesses, etc.) \_\_\_\_\_

\_\_\_\_\_  
(Only prescription medication in bottles marked with the student’s name and all the same type pills in the bottles will be allowed. All other pills or bottles will be confiscated and returned at the end of the trip. These include aspirin and any other over-the-counter medications.) If in doubt, list it.

List any special assistance that may be needed during the Grad Bash trip (wheelchair assistance or any special request.)

\_\_\_\_\_  
\_\_\_\_\_

**I understand and agree to the Grad Bash guidelines.  
Completion of this form allows student to attend Grad Bash 2022-2023.**

Student Signature \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date: \_\_\_\_\_

### Bus Assignment and Seating Request

Please list up to 5 individuals that you would like to be seated with/near on the bus. We will do our best to address your request, but please note that things can change. List in the order of your seating preference.

Please Print Legibly

1. \_\_\_\_\_ 4. \_\_\_\_\_
2. \_\_\_\_\_ 5. \_\_\_\_\_
3. \_\_\_\_\_

**Permission is NOT complete without LCS Activity Permission Form**

**Section I**

**APPLICATION FOR ACTIVITY PARTICIPATION**

A. Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Parent's Work Phone \_\_\_\_\_

I have read and understood all sections of this form that apply to my child. I certify that \_\_\_\_\_, who is a student and whose name is as it appears on his/her birth certificate, is my child or my legal ward, resides with me, and has been residing with me since (date) \_\_\_\_\_ at the following address: \_\_\_\_\_ (ZIP). I also state that we are now living within the attendance boundaries or have been reassigned by the district to \_\_\_\_\_ school.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**B. PERMISSION FOR SUPERVISED FIELD AND ACTIVITY TRIPS**

During the school year, it sometimes becomes desirable to add to the educational experience of our students through planned visits to points outside of the school building. The visit might be a short field trip to a local point of educational interest, or on the middle and senior high school level, it might involve representing the school out of town in some group activity, such as band, chorus, athletic, academic, service club events, etc.

We request that you grant permission for your child to participate in any such trip during the entire school year so that we may keep this form on file and avoid the necessity of asking for such permission on each occasion. The Leon County School Board has authorized the use of buses, private passenger cars and those approved vans that meet all of the Federal Safety Standards to transport students to any such trips. Notification will be provided to you concerning the type of transportation to be used. School officials will provide trip itinerary for all out of county trips.

**Part I: CONSENT**

The undersigned as parent or guardian gives consent for the participant to use the Leon County School Board – approved means of transportation as a representative of \_\_\_\_\_ School for the supervised field and/or activity trips.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**PART II: NON-CONSENT**

The undersigned as parent or guardian does not give consent for the participation to use the Leon County School Board – approved means of transportation as a representative of \_\_\_\_\_ School for the supervised field and/or activity trips.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**C. MEDICAL RELEASE**

**PART I: CONSENT**

The undersigned as the parent(s) and/or legal guardian(s) of \_\_\_\_\_ do hereby authorize the agent or officials of the Leon County School Board to obtain, through a physician of its choice, any emergency medical care that may become reasonably necessary for the student in the course of such athletic activities or such travel. No action shall be taken until an attempt is made to contact me at the phone number(s) listed below. Payment of all charges incurred for medical treatment is guaranteed by parent/guardian or the insurance company providing coverage for above named student.

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

**IN WITNESS** of our consent and agreement to the matters stated above, we have subscribed our signature below.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**PART II: NON-CONSENT**

As parent or guardian of \_\_\_\_\_, I do not desire to sign the medical and surgical release form above.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

**D. INSURANCE**

As parent or guardian of the student identified herein, I understand that the School Board of Leon County is not liable for injuries to participants in school activities. I further understand that all students shall be required to have proper medical insurance before they will be permitted to practice and participate in any co-curricular activity or field trip program.

Date \_\_\_\_\_ Signature of Parent or Legal Guardian \_\_\_\_\_

The following options shall be the only acceptable ones: (Please check your selected option.)

1. = Personal Medical Insurance. The use of your personal medical or active/retired military insurance shall cover the activity(s) that your son or daughter will be participating in the current school year, and the insurance covers a minimum of \$25,000.  
Company \_\_\_\_\_ Policy Number \_\_\_\_\_
2. = Student Activities Insurance Made Available through the School Board of Leon County. The cost of the insurance to be paid by the student participating (each year the county will publish the School Board of Leon County Insurance Plan for students). See school front office for details.