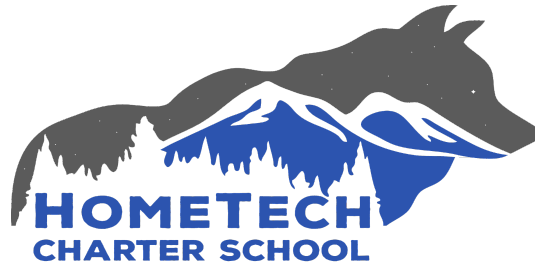


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Julie Crandall,  
Principal/Superintendent  
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**Field Trip Permission Form**  
**to the Butte College Main Campus, Oroville**

\_\_\_\_\_ has my permission to go on a field trip to

Butte College Main Campus on Thursday, April 27, 2023

Arrival Time: 9:00 am Program End Time: 1:25 pm

We will be traveling by: Parent/Self Driver Field Trip Coordinator: Aquina Seher

**I give my permission for my son/daughter to participate in this field trip.**

**Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**MEDICAL PERMISSION FOR TREATMENT:**

Whenever injury or emergency illness occurs to the student listed below while the student is under the supervision of HomeTech Charter School personnel, every attempt will be made to notify the parent or guardian immediately. However, if the parent or guardian is not available and it is felt that the emergency treatment is indicated, the signatures below by the parent/guardian will allow the student to be transferred and treated in a timely fashion. The intention of this form is to grant authority to administer emergency treatment of any and all medical conditions.

Student's Name

Parent/Guardian Signature

Date

Parent Phone Number: Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Name and Phone Number of persons to contact if parent cannot be reached: \_\_\_\_\_