Campbell Collegiate Senior Music Tour Permission Form (Please return this form to the Campbell Music Office by Wednesday, Oct. 26)

I have read and am informed about the Senior Music Tour. I will ensure that all payments to CAMPA are made online as per the payment schedule. If I am unable to make online payments, I will make alternate arrangements with admin.campa.ca for payment.

Please print your son/daughter's full name in the space below:			
Student name:			
In the event of an emergency the following emergency co		t be contacted at home, please try to r	each one of
Name:	Phone:	Relationship:	
Name:	Phone:	Relationship:	
Medical Information – Pleasensitivities/allergies:	ase include below any medical o	or health concerns as well as ALL food	I
I the undersigned parent or participate in the event description		tudent, request that my son/daughter b	e allowed to
music trips. The use of alco school. Students engaging parent or guardian will be co	shol or drugs and/or inappropria are these behaviors are liable to ontacted prior to any action bein	nool Board Pupil Discipline Policy applete student conduct will result in susper to be sent home at their family's expense g taken. If no direct contact is made vaccompanied by a staff member.	nsion from se. The
Parent/Guardian Signature:			
Parent Name (Please Print)	:		
Phone:	Date:		
Student Signature:			