

The Villages® Charter Middle School

Dear Parents/Guardians of 8th Grade Students,

January 31, 2024

VCMS 8th grade students from Buffalo Ridge and Middleton campuses are invited to attend a special field trip designed to celebrate the end of the 8th grade year:

- **Event: Grad Nite 2024** at Busch Gardens - Tampa, FL
- Date of Activity: **Friday, May 10, 2024**
- Time of Departure: 2:30 p.m. from VCMS Buffalo Ridge and Middleton (chaperones arrive at 1:15 pm for a meeting)
- Time of Return: approximately 1:15 a.m. (Saturday, May 11, 2024) at VCMS
 - Buses will pull through the drop off line. Parents will park in the parking lots to allow buses ample room to pass through.

Cost: \$120.00 - includes admission to park, bus transportation, and one meal with a refillable beverage souvenir cup. Payment in full is **due on or before March 15, 2024**. Please fill out and return the attached Permission Slip, Consent Form, and payment for student and chaperone (if requesting to chaperone the trip).

NOTE about Park Passes: Per Busch Gardens procedures, the Fun Cards and Annual Passes **CANNOT** be used as this is a private event.

Additional Money Needed: Students may use Apple or Google Pay or a credit or debit card to purchase any additional food, beverage, or souvenirs. Busch Gardens is a cashless park.

Dress Code: Students must wear their class t-shirt, if purchased. If a class t-shirt was not purchased, students attending the trip **MUST** wear a green or yellow school polo shirt. Bottoms can be jeans or school approved bottoms. Chaperones can purchase a class t-shirt or wear modest casual clothing.

Chaperones: A limited number of chaperones are needed for this trip. If you are interested in attending this trip along with your 8th grade student to **serve as a chaperone in charge of a group of students**, please indicate your desire to chaperone on the next page of this packet. Chaperone seats will be reserved based on all paperwork being submitted and approved as well as payment being received on time. Necessary paperwork includes: **Volunteer Application with a copy of driver's license and up-to-date fingerprinting are required for the named Chaperone. Chaperones will receive 12 hours of PI time. Chaperones are not permitted to drive themselves or their children to the event. Busch Gardens does not allow anyone to arrive in personal vehicles for this private event.**

Academic Standing and Behavior Policy:

- If your child chooses to make poor decisions and receives disciplinary consequences such as multiple suspensions, he/she will not be eligible for this trip and any fees paid will be nonrefundable. Decisions are at the discretion of VCMS administration.
- Students with failing grades in core academic classes or who are in danger of not being promoted to the 9th grade as of **April 26, 2024** are ineligible to attend this event and any fees paid will be nonrefundable.

****Please keep this page for your reference. Tear it off the top and return the rest of the packet to school on or before March 15, 2024. The permission slip packet and the money need to be turned in together.** Every 8th grade student will need to return the packet whether they are going or not. This will help us record your decision so no one is left out or missed by accident. Thank you for your help.

The Villages® Charter Middle School

GRADVENTURE RESERVATION SLIP

Return the rest of this packet to school on or before Friday, March 15, 2024

Name of Student: _____

Grad Nite: Busch Gardens - Tampa, FL

- **Friday, May 10th** from 2:30 pm - 1:15 am Saturday morning.
- **\$120.00** ticket price per person (same price for chaperones) includes admission, a meal, and a refillable cup
- **Cash or Check - Make payable to VCS.** Student and chaperone payment can be made with one check.

My child **will attend** this field trip and included is the signed permission slip/consent form with payment.
(Complete the rest of the information below and the consent form on the next page.)

I (or my spouse/child's guardian) would like to chaperone this event. Chaperone's Name: _____
(This person must submit a Volunteer Application, a copy of their driver's license and have up to date fingerprinting in our system. The chaperone will also need to send payment with this form.)

Email Address: _____ Phone #: _____

I would like to order an 8th Grade Class T-shirt for myself or my child. Please send a separate payment (Cash or Check made payable to VCS) for the t-shirt(s) in the amount of **\$15.00 each** Size(s): _____

My child is **NOT attending** this field trip. I understand that it is still a regular school day, and my child is expected to attend school. (Do not fill out any information after your signature below)

My child will **NOT attend** because this field trip is **too expensive** for our family at this time. (Do not fill out any information after your signature below)

Parent Signature

Date

GRAD NITE Busch Gardens PERMISSION SLIP

Please note the following concerns regarding your child's academic performance and behavior:

- If your child chooses to make poor decisions and receives disciplinary consequences such as multiple suspensions, he/she will not be eligible for this trip and any fees paid will be nonrefundable. Decisions are at the discretion of VCMS administration.
- Students with failing grades in core academic classes or who are in danger of not being promoted to the 9th grade as of **April 26th** are ineligible to attend this event and any fees paid will be nonrefundable.

I have read and understand the academic and behavior requirements to retain eligibility for this trip as well as the fact that any trip fees paid are forfeited.

My child, _____ has my permission to attend this event.
Print Student Name

Signature of Parent/Guardian

Printed Name of Parent/Guardian

PHONE: (352) 259-0044 · FAX: (352) 753-1113
CORRESPONDENCE: 450 Village Campus Circle · The Villages · FL · 32162
WEBSITE: www.tvcs.org

The Villages® Charter Middle School

OFF-CAMPUS SCHOOL ACTIVITY CAMPUS PARENT CONSENT/LIABILITY WAIVER/MEDICAL RELEASE

Student: _____ School: **VCMS-Buffalo Ridge & Middleton**

Club/Group/Class: **8th Grade** Supervising Faculty Member(s): **Vice Principals - Mrs. Rowan, Mr. Molock,
Dr. Mergaert and Mr. Kirkland**

Activity: **Grad Nite 2024** Location: **Busch Gardens - Tampa**

Date & Time of Departure: **Friday, MAY 10, 2024 – Departing at approx. 2:30 PM**

Date & Time of Return: **Saturday, MAY 11, 2024 – Arriving back at school at approx. 1:15 AM**

Method of transportation: **VCS BUSES and WORKMAN TRANSPORTATION CHARTER BUSES**

****Appropriate behavior choices and completion of required coursework to promote to 9th grade will be reviewed by Administration and considered for eligibility to participate in the field trip.**

PARENT CONSENT/LIABILITY WAIVER/MEDICAL RELEASE

- I/We hereby give permission for my child to accompany employees, agents and parents of the Villages Charter School, acting as chaperones, to the field trip listed above for the days indicated above. I/We agree to release and hold harmless The Villages Charter School, their agents, employees and parents accompanying the group, from any responsibility for any accident or injury to my child that occurs while on the field trip listed above for the days indicated above.
- I/We understand that under present law, if my/our child is riding in a private passenger automobile that is involved in an accident, he/she will be primarily covered for bodily injury under my/our family automobile policy, and I/we agree to submit any medical bills incurred to my/our insurance company for payment.
- I/We further agree to indemnify and hold harmless, The Villages Charter School of Sumter, Florida, its agents or employees, for any property damages or personal injury caused by my child whether individually or in concert with any other person or entity. Payment for any damages that occur will be solely the responsibility of the involved child and their parents or legal guardians.
- I/We have read all the information in regards to this trip. I am aware of guidelines of said trip and the number of chaperones which will accompany my child."
- I/We hereby grant permission to the attending physician or his consulting physicians, to render to my son/daughter any emergency treatment, medical or surgical care that might be deemed necessary to the health and well-being of said child. Also, when necessary for the administering of such care, I grant permission for hospitalization at an accredited hospital.
- I/We assume full responsibility and liability for any and all expenses, damage, accident, illness, injury or medical expense of and to my/our child or our property resulting from such participation. I/We attest and affirm that the participant has no limitation that should prevent participation in the activity and I/We have not been advised or informed by anyone to the contrary.
- I/We further agree to inform that the appropriate school official(s) should my/our child's physical condition change in any way and any time so as to affect his/her participation in the activity herein named.

My student has medical insurance:

YES NO Insurance Co: _____ Policy #: _____

Home Telephone #

Work Telephone #

Cell Telephone #

Emergency Telephone #

Parent Signature / Date

Home Address / City / Zip