

LATE RETURN/EXTENDED DAY ATHLETIC TRIP

Parent Consent Form

Parent/Guardian MUST COMPLETE AND RETURN

Student Name: _____

School: Arts Academy at Benjamin Rush

Student ID#: _____ DOB: _____

Grade: _____

Trip Date: SY2024-2025 (Various Dates)

Trip Location: All out of city regional and state level competitions

I, _____, give permission for my child _____
(Parent/Guardian Name) (Student Name)

To travel to all out of city regional and state competitions, with the understanding that they may return during non-school hours (after 7PM/weekends/ etc.) from an athletic competition or event.

The following method(s) of transportation is permitted when my child returns back to their school/central pickup location.

Check all that apply:

☐ Will be picked up

☐ Walk/Bike

☐ Public Transportation(Septa)

☐ Car Share (Uber/Lyft)

If you selected "Will be picked up", you MUST Identify two (2) adults (over 18 years old) that are authorized to pick up your child (MUST HAVE ID)

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Phone/cell: _____

Phone/cell: _____

Parent/Guardian Signature: _____ Date: _____

Phone/cell Number: _____

Emergency Contact Name: _____

Emergency Contact Phone/Cell Number: _____