JOHN DEWEY HIGH SCHOOL

THE NEW YORK CITY DEPARTMENT OF EDUCATION

50 Avenue X Brooklyn, New York 11223 Telephone: 718-373-6400

Fax: 718-266-4385

Heather Adelle Principal

Name: _

School: <u>21K540</u>

International Coastal Cleanup 2025 Kaiser Park Saturday, September 20



PARENT NOTIFICATION/CONSENT FORM DAY TRIP

Trip Date: Saturday September 20 2025

Trip Coordinator: Mr Dispenza, Ms. Woods, & Mr. Moody	Cost for trip: <u>Free</u>
Destination: Kaiser Park 2529 Neptune Ave Brooklyn, NY 11224	
Departure Site: <u>Travel on your own to Kaiser Park</u>	Departure Time: 10 am
Return Site: <u>Dismissal on site</u>	Return Time: 12 pm
Mode of Transportation: Public transport	
Purpose of Trip: Community service and Team Building	411 1 d? 1 1
Specific Clothing/Equipment Required for this Trip: Wear comfor	
	(e.g., swimming, horseback riding, ice skating, skiing, boating, etc.).
	pove-listed physical and sports activities and I consent to my child's
participation in all these activities except for the following:	other condition, including special dietary and medication needs, or the
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c) I agree that in the event of an emergency injury or illness, the s	our child:staff member(s) in charge of the trip may act on my behalf and at my
expense in obtaining medical treatment for my child.	turn member(s) in charge of the trip may act on my behalf and at my
d) I understand that my child is expected to behave responsibly as	nd to follow the school's discipline code and policies.
	my child. I release the school from all claims and liability that arise in
connection with the trip, except if due to the negligence of school	
f) I understand that I am responsible for getting my child to and fi	rom the departure and return sites identified above. I understand that my
	cluding while traveling from the departure site to the destination site, ar
from the destination site to the return site.	
g) I understand that alcoholic beverages and/or illegal drugs are p	
understand that if my child is found in possession of these substan	nces, he/she will be subject to school disciplinary procedures and
possible criminal prosecution.	ode may be excluded in the future by the school from participating in a
trip.	ode may be excluded in the future by the school from participating in a
i) In an emergency, I can be reached at:	
	vening: ()
	Phone Number: ()
Additional Emergency Contact: Name:	
j) I give my permission for my child to participate in this school t	rip.
(G) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	
(Signature of Parent/Guardian)	
STUDENT DECLARATION	
	in the same responsible manner in which I am expected to conduct
myself in school.	
(Signature of Student)	
OSIS	
0310	
Email@nycstudents.i	net

INTERNATIONAL COASTAL

Saturday, September 20, 2025

Time: 10am-12pm Location: Kaiser Park

2529 Neptune Ave, Brooklyn, NY 11224





Register Here







