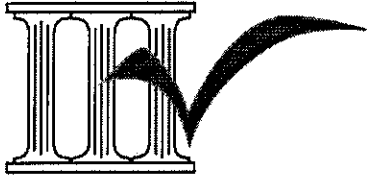


Keep for your records



The mission of the Three Village Central School District, in concert with its families and community, is to provide an educational environment which will enable each student to achieve a high level of academic proficiency and to become a well-rounded individual who is an involved, responsible citizen.

**THREE VILLAGE**  
CENTRAL SCHOOL DISTRICT

**Alan L. Baum, Principal**  
**Ward Melville High School**

## **Skinny Water Fluke**

**TRIP DATE: JULY 13<sup>TH</sup>, 2019**  
**TRIP LOCATION: SHINNECOCK NY**

Dear Parent, Guardian and Fishing Club members,

I would like to first thank you for your interest in attending our Ward Melville Fishing Club Field trip upon the Shinnecock Star out of Shinnecock, NY on Monday Evening July 1<sup>st</sup> 2019. By signing the attached filed trip permission slip and returning it to the club advisor, you acknowledge the following:

- ✓ The duration of the trip runs from 5:00 PM till approximately 8:00 PM
  - **The boat will be leaving the dock at 5:00 PM sharp and if you are late, you will miss the boat and there will be no refund. Be to the dock no later than 430 pm.**
  - **All students attending the field trip are required to provide their own transportation.**
- ✓ There is only room for 20 passengers on this trip. Any Ward Melville Fishing Club member or student can attend this trip for a huge discount of \$20. Please see Mr. Wilson with any questions about this.
- ✓ Family and friends of club members are welcome to join us on this trip. We will have a waiting list so please get your information in right away.
- ✓ Target species for this trip will be fluke. We will be looking to primarily bucktail on this trip. Captain has final say in what we are going for and where but the Captain and I are in agreeance to have this as a fluke bucktailing trip.
- ✓ All payments must be in the form of a check made payable to Three Village Central School District or TVCSD for \$20 (usual fare alone is \$45 plus tip) All necessary tackle and bait are provided for by the boat.
- ✓ It would be wise to pack cooler or insulated bag to bring your potential catch in. Or have one waiting for when we come back to the dock!!!
- ✓ **The trip is non-refundable.**

**Assistant Principals:** Mary Castiglie, Rosanne DiBella, Michael Owen

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380 Old Town Road ■ East Setauket, New York 11733-3499 ■ Telephone: 631-730-4900 ■ Fax: 631-730-4901

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Cheryl Pedisich, Superintendent of Schools  
Kevin Scanlon, Assistant Superintendent for Educational Services  
Jeffrey Carlson, Assistant Superintendent for Business Services  
Gary B. Dabrucky, Ed.D., Assistant to the Superintendent for Human Resources

- ✓ In the event that we have more people looking to go on the trip than we have spots for, a waiting list will be created.
- ✓ The captain determines whether we sail or not. More details to follow on this and if the trip is canceled due to weather, you will be notified the night before at the very latest.
- ✓ Permission slips are due before we take our trip.
- ✓ Since this is a school related field trip, the Code of Conduct as outlined in the student handbook and also excerpted on the permission slip is in effect. All students are required to follow this code of conduct.
- ✓ Proper dress is an issue that must be addressed. If it rains, we will get wet so have at the very least a poncho if the weather calls for rain. Remember, it is easy to remove a layer of clothing but you can't put on what you didn't bring.

If there are any question in regards to the trip, please do not hesitate to contact me via phone 631 730 4900 (leave a voice mail for me) or through email [rwilson2@3villagecsd.k12.ny.us](mailto:rwilson2@3villagecsd.k12.ny.us)

We look forward to a safe, fun and interesting trip.

Sincerely,

Bob Wilson  
Ward Melville Fishing Club Advisor

---

Student Name

---

Parental Signature (allowing for permission to attend)

---

Emergency Contact #

**FIELD TRIP PERMISSION FORM**

Student Name: \_\_\_\_\_

Student Tel. #: \_\_\_\_\_

Destination: \_\_\_\_\_

Date: July 13<sup>th</sup>

Sponsoring Teacher: Bob Wilson

Total Student Expense: \$ 20

Place of Departure: Oaklands Marina - Dunc Rd South Humph

Departure Time: 5<sup>00</sup> pm

Place of Return: Oaklands Marina - Dunc Rd South Humph ny

Arrival Time: 8<sup>00</sup> pm

I wish to have my child \_\_\_\_\_ participate in this field trip for the purpose of broadening his/her knowledge, understanding and appreciation of

skiing water fluke fishy aboard the Shinnecock Star

**MEDICAL RELEASE** (print neatly please)

I, \_\_\_\_\_ give to MR WILSON, and/or  
(Parent/Guardian) (Trip Advisor/ Ward Melville High School Faculty Member(s))

their designee, the right to act in *loco parentis*, including seeking and obtaining medical treatment(s), special treatment or hospitalization for my daughter/son, \_\_\_\_\_, in the  
(student)

event of needed medical care during the Shinnecock Star Fium Trip  
(name of field trip/event)

field trip, 7 / 13 / 19  
(dates of field trip/event)

Of course every reasonable effort will be made to contact and consult the student's parent/guardian before obtaining medical treatment.

**PLEASE NOTE THAT IF THIS IS FOR AN OVERNIGHT FIELD TRIP YOU MUST SIGN THIS FORM IN THE PHYSICAL PRESENCE OF A NOTARY PUBLIC.**

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

Health Insurance Carrier: \_\_\_\_\_ Policy & Group #'s \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
(Notary Seal/Signature)



*Continued.....please turn over*

**RETURN THIS FORM TO THE SPONSORING TEACHER**

## FIELD TRIP PERMISSION FORM

### CONTACT INFORMATION: (print neatly please)

Parent/Guardian Name:

\_\_\_\_\_

Last,

First

Contact Phone Numbers: (please include area codes)

\_\_\_\_\_

Daytime

\_\_\_\_\_

Evening

\_\_\_\_\_

Cell

Alternative Contact Information

\_\_\_\_\_

Last,

First

Relationship to Parent/Child: \_\_\_\_\_

Contact Phone Numbers:

\_\_\_\_\_

Daytime

\_\_\_\_\_

Evening

\_\_\_\_\_

Cell

### ALLERGIES, MEDICATIONS, ALLERGIC REACTIONS

If there are known ALLERGIES your child suffers from, required DAILY MEDICATIONS, OR ALLERGIC REACTIONS to any medication, please list them below. If your child has a recurring MEDICAL PROBLEM that should be aware of, please list this as well.

\_\_\_\_\_

**OTHER:** (anything else we should be aware of or know about)

\_\_\_\_\_

### STUDENT CONDUCT:

I understand that my behavior reflects on Ward Melville High School and myself. I will maintain the high standards and expectations of good behavior on this trip. I will observe nightly curfew requirements; take care of personal, public, hotel, and school belongings and property, and realize that I am responsible for any loss; show respect for fellow students, teachers and other personnel; honor all requests on the part of the advisor/teacher/chaperones; travel in groups during free-time activities and whenever possible; remain together as a group with chaperones when traveling off campus/site; and adhere to the TVCSD Code of Conduct at all times. Further, I understand that any use of drugs or alcohol, or possession of drugs or drug paraphernalia or alcohol, during any part of this trip, may result in a school suspension and exclusion from participating in any sport, club activity, or field trip – including the graduation exercise and the prom. In addition, the police will be notified.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent /Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

**RETURN THIS FORM TO THE SPONSORING TEACHER**