Clackamas Middle College
12021 SE 82nd Avenue
Happy Valley, Oregon
Telephone (503) 518-5925

CMC Activity Field Trip Authorization Form

On **Friday, Nov. 14th, 2025**, CMC is organizing a trip to a **Portland Winterhawks game**. This activity is to help build on our school goal of every student feeling part of an accepting school culture.

NATURE OF ACTIVITY: ***Portland Winterhawks Game - Hockey***

DESTINATION: ***Memorial Coliseum: Portland, OR***

COST: **$20 & 1 Can of Food for the Food Drive (paid to CMC at front desk)** – Includes ticket to game and transportation

DATE: Friday, November 14, 2025

TIME OF DEPARTURE: 6:00pm (from CMC)

DATE/TIME OF RETURN: Departing Coliseum at 9:30pm. **Please be waiting at CMC for your Student at 9:45pm at CMC.**

TRIP SUPERVISOR: CMC Staff Members

MEANS OF TRANSPORTATION: District-owned bus

FILL OUT THE BOTTOM OF THIS SECTION AND RETURN TO CRYSTAL WITH YOUR $20 & 1 CAN OF FOOD BY Nov. 10th

(Print Name of Student)_____ has the opportunity to participate in a school activity away from school premises. If you approve the following arrangement, please sign at the bottom of this section and return to the faculty sponsor.

- I understand the nature of the school activity in which my son/daughter will be participating and that he/she is expected to abide by all school regulations during the course of the activity.
- I hereby give my permission for him/her to participate in the above-described activity.
- I further agree that, in the event of an accident, illness or any other circumstance requiring medical treatment, such treatment may be procured for my son/daughter without financial obligation to the district.

Signature of Parent/Guardian _____ Date: _____

IMPORTANT MEDICAL INFORMATION THE SUPERVISOR SHOULD KNOW:

EMERGENCY TELEPHONE NUMBERS: