

CAM Academy Activity Permission Form

Lewisville Park June 10, 2025

Student: _____ Grade: _____ Teacher: _____

***My student, as listed above, has my permission to participate in the activity described below. I understand and have communicated with my student that they are not allowed to leave the areas designated by CAM this includes not going down to or in the river.**

Parent Printed Name **X** _____
Parent Signature

On the **day of the activity**, I can be reached at: _____ or _____

An **alternate emergency** contact person is: _____ at _____

Information we should be aware of (medical concern, pick-up plan, etc.):

** I would like to Chaperone ☐ Name _____

***Are you a cleared CAM Volunteer? Yes ☐ No ☐ *If no, please fill out a volunteer form and call the office.

EVENT DETAILS

ACTIVITY: Lewisville Park End of Year Recognition and Team Building

DATE & TIME: June 10, 2025, 11am - 2pm

LOCATION: Lewisville Park

COST: Free **(There is a \$3 parking fee at the park)**

TRANSPORTATION: Parents will need to drop off students at Lewisville Park at 11am and pick them up by 2pm

Permission form to be turned into Student Services by June 6, 2025

****No late permission slips will be accepted. All chaperones must be a cleared volunteer by the district. Please be sure your student is picked up on time after the event.**