<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monday, November 25</strong></td>
<td></td>
</tr>
<tr>
<td>7:30 a.m.</td>
<td>Depart Fairport High School</td>
</tr>
<tr>
<td>9:00</td>
<td>Youngstown State University (not confirmed until start of semester)</td>
</tr>
<tr>
<td>11:30</td>
<td>* Lunch included at YSU - Christman Dining Hall, 220 Custer Ave.</td>
</tr>
<tr>
<td>12:30 p.m.</td>
<td>Depart YSU</td>
</tr>
<tr>
<td>1:30-3:00</td>
<td>Hiram</td>
</tr>
<tr>
<td>3:00 p.m.</td>
<td>Depart Hiram College</td>
</tr>
<tr>
<td>3:30-5:30</td>
<td>Kent State University</td>
</tr>
<tr>
<td></td>
<td>* Admissions presentation and guided tour of campus</td>
</tr>
<tr>
<td></td>
<td>University of Akron</td>
</tr>
<tr>
<td></td>
<td>driving visit of campus</td>
</tr>
<tr>
<td>7:30</td>
<td>* Dinner at Mike's Place</td>
</tr>
<tr>
<td></td>
<td>* unique and memorable surroundings</td>
</tr>
<tr>
<td></td>
<td>Check into hotel: Hampton Inn &amp; Suites - Kent (330-673-8555)</td>
</tr>
<tr>
<td>9:00</td>
<td>Bowling - Kent Lanes (Available see Itinerary)</td>
</tr>
<tr>
<td></td>
<td>* Unwind from touring as you compete with your friends</td>
</tr>
<tr>
<td>10:30</td>
<td>Check into hotel Hampton Inn - Kent - 330-673-8555</td>
</tr>
<tr>
<td><strong>Tuesday, November 26</strong></td>
<td></td>
</tr>
<tr>
<td>8:30 a.m.</td>
<td>Deluxe continental breakfast at hotel</td>
</tr>
<tr>
<td>9:00</td>
<td>Depart Hotel</td>
</tr>
<tr>
<td>9:00</td>
<td>University of Akron</td>
</tr>
<tr>
<td></td>
<td>* Guided tour and Admissions Counselor presentation</td>
</tr>
<tr>
<td></td>
<td>* Time to visit the bookstore</td>
</tr>
<tr>
<td>11:15</td>
<td>Depart University of Akron</td>
</tr>
<tr>
<td>12:30 p.m.</td>
<td>Ashland University</td>
</tr>
<tr>
<td></td>
<td>* Lunch at Ashland University</td>
</tr>
<tr>
<td>1:30</td>
<td>* Guided tour and Admission Counselor presentation</td>
</tr>
<tr>
<td></td>
<td>visit the book store</td>
</tr>
<tr>
<td>3:30</td>
<td>Depart for home with many wonderful memories</td>
</tr>
<tr>
<td>5:30</td>
<td>Approximate return to Fairport Harding High school</td>
</tr>
</tbody>
</table>
20/20 Parent Meeting

Trip Dates: November 25 & 26

Agenda
- Tour Company - R & E Tours
- Cost
- Itinerary
- Medication 101
- Frequently Asked Questions

Recreational & Educational Tours

Rick Klimek is the proud owner of Recreational and Educational Tours, bringing middle schools, high schools, student bands, and adult groups to the most exciting city centers of the U.S. and Canada.

916-954-4000 (888)
Tour@R&ETours.com

Transportation

With all our trips, we use deluxe motor coaches.

Cost

This experience is an all expense paid trip from our Board of Education for the top 20 sophomores and juniors. By the time our students graduate, they should have seen 10-15 different college campuses.

Travel Itinerary

- See handout.
- Tour includes:
  - Deluxe motor coach transportation (56 passengers)
  - One night lodging (see itinerary)
  - Private highrise supervision at the hotel
  - Company tour manager on coach bus from departure to return
  - Meals (4) (breakfast at the hotel, lunch at Troy University State & Ashland University, dinner Mike's Place)
**Campuses Visiting**

- Art Institute
- Dartmouth College
- Harvard College
- Smith College
- Bowdoin College
- Boston University
- Brown University
- Bowdoin College

**Prescriptions**

**Over the Counter**

Mrs. Bode will have this available.

All medical forms due by November 1.

**Medications Continued: Proper Form needed.**

For all medication including inhalers and epi-pens:

- Name of medication
- Dosage
- Furn/Interval
- If student will be carrying medic or epipen the form must be marked accordingly.

All medication needs to be in correctly labeled and will go in Mrs. Bode box.

**Frequently Asked Questions.**

???

What time does my child need to arrive to school on the day of departure?

- Students should arrive to school at 7:00 AM.
  
  In order to ensure a timely departure. We will meet in the cafeteria.

How are roommates selected?

- Students may pick their own roommates and create groups of 4.
- Students without a group of 4 will be assigned one, or combined with other smaller groups to create one.
- These will be created closer to the trip.
What happens once students enter the building on departure day?
- Students should report to the cafeteria.
- Luggage and bags will be checked by staff.
- Students will remain in the cafeteria until we board the buses.
- Nurse will be available for medication drop off.

How much luggage can be brought?
- Students may bring one bag to be checked and carried under the bus in the cargo area.
- Students may also bring one carry-on.
- Students are responsible for carrying all of their own items.
- **ALL LUGGAGE SHOULD BE MARKED WITH YOUR CHILD’S NAME!!!**

What type of clothing should be worn?
- **ALL SCHOOL DRESS CODE RULES APPLY**
- Comfortable shoes. We will walk... **A LOT!!**
- Dress for the weather. Rain or shine students will be walking and visiting sites. Pocket ponchos are a great idea.
- Pants or shorts w/ pockets are recommended.

What other items should my child bring?
- Check the weather and plan for jacket or sweatshirt if need be to carry.
- Other **optional** recommended items...
  - Poncho/drawstring bag
  - Souvenir money

Should my child bring money?
- Souvenir money is optional.
- Please be mindful of the amount you will be sending.
- Students are responsible for all money that they bring.

Are snacks permitted for the bus?
- Yes, as long as they follow these guidelines...
  - Drinks must be in a non-glass resusable container.
  - No energy drinks. No... None
  - No coolers.
  - Snacks on bus need to be stored in carry on bag.
  - Please refrain from items w/ peanuts/peanut butter.
  - **BRING WATER!!**
What electronics are permitted on the trip?
- Cell phones are permitted.
- Other small personal electronic devices are permitted on the trip (iPods, Gaming Devices, e-books, etc.)
- External chargers are a great idea. We cannot guarantee charging capabilities on the bus.

Is there security in the hotel?
- Yes, security will be on duty throughout the evening.
- Chaperones will do a final check in at lights out.
- If any rooms are causing an issue, security will notify chaperones who will address the issue.

What is the policy for students who do not meet the behavior expectations on the trip?
- Staff will conference with student with possible call home.
- If a student participates in extremely unsafe or illegal activity, may result in a phone call home to be picked up at the expense of the parents.
- Student is subject to further consequences at school upon return.

What time should I pick up my student from school upon return from the trip?
- Students should be picked up at approximately 5:30 PM.
- Students will call home 30 mins out from returning to school.

What if my child needs medication?
- The school nurse will need all medication and paperwork turned into the clinic prior to the trip.
- This includes all over-the-counter medications.
- The school nurse will administer medications as directed on the paperwork.
- Paperwork must be completed with medication by November 1.

How do I get the medication back?
- Medication will only be returned to students/parents.
- Medication can also be picked up from the clinic the next day.

Do I need to sign my child out?
- No.
Other Questions?
- Feel free to contact Mrs. Jurick or the tour company with any other further questions you may have.

_We are looking forward to a great time!_
FAIRPORT HARBOR EXEMPTED VILLAGE SCHOOLS
OVERNIGHT TRIP

EMERGENCY MEDICAL AUTHORIZATION

Student's Name ___________________________ Grade ___________________________

Last First M.I. Birthdate ___________________________

Parent(s)/Guardian Name ___________________________

Home Address _____________________________________________

Home Phone ___________________________

IN CASE OF EMERGENCY DURING THIS TRIP, CONTACT IN THIS ORDER:

1. ___________________________ Name ___________________________ Relationship ___________

2. ___________________________ Name ___________________________ Relationship ___________

3. ___________________________ Name ___________________________ Relationship ___________

Preferred Doctor ___________________________ Phone Number (______) ___________________________

Please list below facts concerning the above named child's medical history including allergies to medications/foods/insects, medications being taken and any physical impairment to which a physician should be alerted.

ALLERGIES (medications, environmental, food, animal bites/stings): ___________________________

Pertinent Medical History/Health Problems: ___________________________

Medications being taken: ___________________________

Other: ___________________________

******************************************************************************* TO GRANT CONSENT *******************************************************************************

In case of emergency and reasonable attempts to contact the above named individuals are unsuccessful, we request school authorities own judgment in sending the child to the hospital via local rescue (911). This authorization does not cover major surgery unless the medical opinions of two other licensed physicians concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

Date: ___________________________ SIGNATURE OF PARENT OR GUARDIAN ___________________________

******************************************************************************* TO REFUSE CONSENT*******************************************************************************

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

Date: ___________________________ SIGNATURE OF PARENT OR GUARDIAN ___________________________

MUST BE RETURNED TO THE SCHOOL BY November 1, 2019
FAIRPORT HARBOR SCHOOLS
OVERNIGHT TRIP
PARENT REQUEST FOR MEDICATION

I hereby request that my child, ____________________________, be given the following medication(s) as directed below if needed. A stock supply of the below medications will be provided by and kept with the Fairport staff at all times. **No child shall bring a personal supply of medication with him/her.** Please check the following medication(s) you authorize the Fairport staff to dispense to your child.

_____ Acetaminophen (Tylenol)  1-2 tablets every 6 hours as needed for headache/fever/discomfort

_____ Ibuprofen (Advil)  1-2 tablets every 6 hours as needed for headache/fever/discomfort

_____ Dramamine  1-2 tablets every 4-6 hours as needed for motion sickness

_____ Benadryl 25mg every 6 hours as needed for allergic reaction (redness, hives, itching)

By signing below, we release and forever discharge the Fairport Harbor Board of Education, its executors and administrators, from all debts, claims, demands, damages, actions and causes of action whatsoever, and more specifically that if there is a failure to dispense said medications and drugs, hereby indemnify and hold harmless both the Board of Education, its executors and administrators, from any and all claims whatsoever which may be made against them.

*Signature of father ____________________________

*Signature of mother ____________________________

Home telephone number _________________ Date _________________

*Both parents must sign this release if they are living with or have custody of child. If parents are separated and both still retain legal custody, both parents must sign. If one parent is awarded custody, signature of custodial parent only is required. If child is in a foster home and placement is by an agency that holds custody, agency must sign. If the child is a ward, court-appointed guardian must sign.

THIS SIGNED FORM ALONG WITH THE EMERGENCY MEDICAL AUTHORIZATION AND PERMISSION SLIP MUST BE RETURNED TO THE SCHOOL BY November 1, 2019
To: Parents

From: Heidi Bodi, RN
School Nurse
Fairport Harbor Schools

Re: Overnight trip medications

If your child takes a prescription medication, in accordance with school policy, I need to receive authorization from the prescribing physician. I must have this in order to dispense the medication during the trip. The information I need from you is:

Medication:

Dose:

Physician’s name:

Physician’s office phone number:

Physician’s office FAX number:

Please return this to the school by November 1, 2019. Feel free to contact me if you have any questions at hbodi@thevs.org.

If your child takes medication, I will get the medicine from you the morning we depart. The medicine must be in the original bottle and please only send the amount required for the duration of the trip.