



Authorized By: _____ Date: _____

Brooklyn Technical High School

David Newman, Principal

29 Fort Greene Place · Brooklyn, New York · 11217 · Telephone: (718) 804-6400
Fax: (718) 260 – 9245 · www.bths.edu

Chancellor's Regulation A-670



PARENT NOTIFICATION/CONSENT FORM

PROM: CLASS OF 2025

DEADLINE TO PAY Early Bird MARCH 4- MARCH 28TH: \$185.00

Regular Pricing: APRIL 1-APRIL 23RD: \$210.00

NOTARIZED PERMISSION SLIPS DUE BY APRIL 30TH

PRINT Student Name: _____ **OSIS:** _____

PRINT BTHS Email: _____

Name of your one GUEST (if one) _____

School your date attends _____

School Brooklyn Technical HS: PROM

Trip Date: June 7, 2025 **Coordinator:** Class of 2025 COSA: Christina Massie

Destination: Terrace on the Park, 52-11 111th Street, Flushing Meadows Park, NY 11368

Starting Time: Begins 7:00 PM **Doors Close** by 9 PM **Conclusion Time:** Midnight

Mode of Transportation: On Own, Highly suggested to Uber, drive, pick-up on way home

Cost of Trip: Early Bird \$ 185.00 until March 28th Regular Price: \$210.00 until April 23rd
(NO REFUNDS)

Purpose of Trip: Senior Prom Theme: Renaissance "A Midsummer Night's Ball"

Specific Clothing/Equipment required for this Trip: Can wear the outfit of choice. MUST adhere to the proper School Dress Code (BTHS.EDU)

This trip will include the following physical and sports activities: Dancing

- I understand that there are risks of injury associated with the above-listed physical and sports activities. This activity is consenting to my child's participation in dancing.
- Please indicate below any permanent or temporary medical or other condition, including special **dietary and medication needs**, or the need for visual or auditory aids, which should be known about your child: Medical: _____

Dietary: _____

Please check if the following applies: **Kosher** _____ **Halal** _____ **Vegan** _____

Vegetarian _____ **Allergic to** _____

- I agree that in the event of an emergency or illness, the staff members(s) in charge of the trip may act on my behalf and at my expense in obtaining medical treatment for my child.
- I am responsible for getting my child to and from the departure and return sites identified above. I understand that my child shall NOT be accompanied by the staff members(s) while traveling to and from the destination site **Terrace on the Park.**

- c) I understand that my child is expected to behave responsibly and to follow the school's discipline code/ policies and those of New York City & NY State Law. I understand that if my child brings, holds or shares any substances of alcohol, drugs, or vapes that a parental guardian **MUST** pick up their child from the prom. Your child will not be able to continue to participate at the prom and consequences will be set by our Dean of Health and Safety & Principal. I understand that if my child is sent home early from the prom, I am responsible for all costs associated with such early departure and forfeit any monies paid that are not refunded to the school.
- d) I agree and understand that I am responsible for the actions of my child. I release the school from all claims and liabilities that arise in connection with the trip, except if due to the negligence of school officials.
- e) I understand that my child cannot participate in any trip without my express written permission to do so which I give by signing this notification and consent form by notary. **PLEASE SIGN IN FRONT OF THE NOTARY.**

Signature of Parent/Guardian

Date

Parent/Guardian Email

Parent/Guardian Contact Emergency Phone Number(s)

Relationship to Student

Notary Stamp & Signature

STUDENT DECLARATION

I have read this form and I understand that I am to behave on this trip in the same responsible manner in which I am expected to conduct myself in school. I understand that disciplinary measures will be taken if rules are broken and your guardians or parents will be called to pick you up from the event. All dress wear must be school appropriate. Familiarize yourself with the BTHS dress code on our webpage

Signature of Student

Date

PRINT STUDENT NAME: _____ **OSIS#:** _____

I understand that the following conditions apply:

A. My child is expected to travel to the trip destination
() ACCOMPANIED (X) UNACCOMPANIED

B. My child is expected to travel from the trip destination
() ACCOMPANIED (X) UNACCOMPANIED



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Permission Slip Submission Receipt

Needed Only if you PAY in THE SGO STORE
DEADLINE TO PAY: Early Bird March 28th

Regular Pricing Deadline: April 23rd

NO REFUNDS

PRINT Student Name: _____

OSIS Number: _____ Email: _____

School Event/ Trip: Class of 2025 PROM

Date(s) of Trip: Saturday, June 7, 2025

This paper must be brought to and signed by the **Office of the Coordinator of Student Activities (7C1)** upon submission of a completed permission slip. Once this form has been signed, any payments to the **S.G.O. store (7C5)** may be permitted. If paying on-line, students must submit a copy of the printed receipt produced from the on-line store confirmation of payment page with the appropriate permission slip for that trip. This form must be signed and returned to the student after the permission slip submission verification in the C.O.S.A. office.
The payment for this trip (check one):

_____ Was made ON-LINE
store

_____ Will be made In-Person at the S.G.O.

COSA OFFICE SIGNATURE

SGO STORE SIGNATURE

DATE _____

DATE _____