

ANDREWS MIDDLE SCHOOL

3000 Mystic Valley Parkway

Medford, MA 02155

Tel. 781/393-2228

Fax: 781/393-2336

Mr. Paul D'Alleva
Principal

Miriam Marotta
Assistant Principal

“Excellence through Responsibility and Respect”

Grade 8 New York City Trip

June 8,9,10, 2012

Friday, Saturday, Sunday



**PLEASE READ, SIGN AND RETURN ALL
DOCUMENTS THAT REQUIRE A SIGNATURE.**

November 16, 2011

Grade 8 trip to 2012 New York City, June 8, 9, 10 Friday, Saturday, Sunday

New York City is probably the most famous city in the world next to London and Paris. This wonderful place saw the birth of finance, history, music, dance, many rock stars and people who had a flare for the arts. Famous buildings are located throughout the city limits- The Empire State Building, Top of the Rock, Central Park and the Central Park Zoo, The Statue of Liberty, Saint Patrick's Cathedral, Times, Square, Broadway (home to many Tony award winning shows) and the Natural History Museum.

This is an opportunity for you to join your classmates in a great trip with educational benefits and tons of fun! Don't miss out on this great Middle School experience that you will always remember.

Dear parents and guardians,

We are really excited about our upcoming trip to New York City. Ms. Lavin has been working with the tour company and has developed an envios trip (itinerary attached). At this time, I would like to address some details about the trip.

REMEMBER THERE ARE A LIMITED NUMBER OF SEATS.

1. Cost: The final cost will be \$475.00. The slight increase is due to the addition of an additional security guard at the hotel (security guards are on duty throughout the night on our wing of the hotel to ensure safety and allow chaperones a few hours of sleep), and a dinner allowance for the ride home (since most kids have spent their money). Therefore, the only two meals students must purchase are lunch on Saturday and Sunday. (Payments must be complete by MARCH 1, 2012)

2. Food: Besides food mentioned above, students will have plenty of opportunities to buy snacks, cold drinks etc. at most locations. However, the breakfast buffets and dinners are very ample, and we will really try to talk kids out of purchasing too much food during the day. Students can bring breakfast items on the bus trip to NYC and need to bring a lunch for Friday. They may bring snacks for their room, but these should be limited. If each person brought one item, it will be more than enough since we shall only be in rooms after dinner. IF YOUR CHILD HAS A FOOD ALLERGY, MAKE SURE YOU NOTE IT ON THE MEDICAL FORM.

3. Spending money is up to individual...breakfasts and dinners are paid. All admissions, fares, room charges, taxes, gratuities are included. \$30-40/ day is usually enough.

4. Phone calls: There will be a 24 hour emergency number provided as well as the number at the hotel for emergencies. WE ASSURE YOU THAT YOU WILL BE CONTACTED IMMEDIATELY IF THERE IS ANY ISSUE AT ALL. PLEASE DO NOT CALL YOUR CHILD DURING THE DAY ON THEIR CELL PHONES. WE ARE ON A VERY TIGHT SCHEDULE AND THIS COULD BE DISTRACTING AND UNSAFE , ESPECIALLY WHILE CROSSING STREETS. CHECK INTINERARY FOR TIMES WE ARE AT THE HOTEL.

5. Contacts: All contact info, security, hotel, direct emergency line are on itinerary.

6. Behavior: This is a wonderful group, and we anticipate no problems. However, to ensure the former, both you and your child will be required to sign the enclosed Academic/ Behavior Agreement.

7. HEALTH FORMS: *****

Attached are two Health forms. The “Health Information and Permission form” must be completed for each student. **PLEASE ANSWER EVERY QUESTION.** The second page is a medication form which must be completed if student is to take any medication, prescription or over the counter.

8. MEDICATION: There will be no exceptions to the following:

- a. Any medication must be in its original box or prescription bottle.
- b. Over the counter medications must be in purchase container and in a baggie with student’s name, directions, and dosage taped to cover in some format.
- c. Prescription medications must be pharmacy container that displays child’s name, dosage, doctor’s name, medication name.
- d. Medications will be distributed as is indicated.
- e. If you or your child wishes to have the medication taken privately, please indicate. However, please ascertain your child knows an adult will witness consumption of all distributed medications.

*Some students may need to include a medication for travel sickness.

Thank you for your participation in this important learning and social opportunity as your child complete

HOW DO I SIGN UP??????

You may sign up by completing the REGISTRATION FORM and returning with cash or a check for **\$100.00 by December 2, 2011**. You may pay as much as you want but must make this deposit and another **\$100.00 payment by December 16, 2011** . A payment schedule will then follow.

HOW MUCH WILL IT COST????

We have worked hard to make the trip affordable for all. The total cost is \$475.00, which includes transportation (luxury coach bus), hotel, (rooms of four, less occupants pay higher rate), breakfasts and dinner, Broadway show, And All admissions and fees in New York. You need to pay for your lunch, snacks and souvenirs if you choose to buy them. We have arranged a monthly payment plan making it easy to pay.

DO I NEED TO BRING A PARENT???? **Sorry, no parents on this**

trip. We shall have teachers from our school and shall be joined by tour guides on our bus, more tour guides when we arrive in NY, and security people in our hotel. When everyone has decided who is going, you can put together your own roommates or we’ll help you. The students remain with their group and adult chaperone at all times.

Parents can email Mr. D’Alleva or Ms. Lavin with questions.

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*Paul D'Alleva
Principal*

*Miriam Marotta
Assistant Principal*

New York City

Dear parents and guardians,

Please find below the form for the down payment for the June 8,9,10, 2012 New York City trip. Please fill out and detach and return with \$100.00 by DECEMBER 2, 2011. Another payment of \$100.00 is due by DECEMBER 16, 2011. A payment schedule will follow.

**Thank You
Ms. Lavin**

**Andrews Middle School
781-393-2228**

Please detach and return with deposit of \$100.00 by DECEMBER 2, 2011

Student's Name _____ Homeroom _____

Enclosed please find cash, or money order for the amount of \$100.00 made out to Andrews Middle School.

Please put in an envelope and bring to Ms. Lavin along with this form by DECEMBER 2, 2011

MUST BE SIGNED AND RETURNED WITH \$100.00 Deposit

Signed _____

MUST BE FILLED OUT AND RETURNED

**BEHAVIOR/ACADEMIC GRADES CONTRACT
GR. 8 TRIP TO NEW YORK CITY
ANDREWS MIDDLE SCHOOL**

Please read the following very carefully. Once you sign this form and return with a deposit, it becomes a legally binding contract. If your child withdraws or is removed from the trip, you will still be responsible for paying the balance and will not receive back any money already paid.

BEHAVIOR

Students must maintain appropriate behavior and good citizenship in school in order to participate in the NY City Trip. If a child is consistently rude and disruptive in class and does not follow directions, they may be removed from the trip at any time. Major school violations will be grounds for immediate removal from the trip. Please review the Parent Student Handbook given at the beginning of the year or on our website.

ACADEMIC

Students must maintain appropriate academic standards in order to participate and attend the NY City Trip. These standards must meet promotion standards ---students must be passing ELA, Math, Science and Social Studies.

If a child is removed from the trip for any reason, there will be no refund and you are responsible for paying the balance due. Hotels and Admission fares are paid early on and are not refundable to the school.

I _____ (your name) the parent/guardian
Of _____ (student's name) have read and understand
all the conditions outlined above.

I further understand that by signing this form and returning it with a \$100.00 deposit

I am committing my child to the 2012 Andrews Middle School, Trip to NYC.

I am responsible for payment in full if my child withdraws from the trip.

I am responsible for payment in full if my child is removed from the trip for academic and/or behavioral concerns

There will be NO reimbursement for payments made.

I hereby state that I have read the above statement and agree to the terms. I have enclosed a \$100.00 deposit to reserve enrollment for my child on the 2012 Grade 8, New York City Trip.

Signed Parent/Guardian _____

Date _____

HEALTH INFORMATION & PERMISSION FORM

Name _____ Sex _____ Date of Birth _____

School Program_ NYC TRIP Attendance Date JUNE 8,9,10, 2012

Parent's Name _____ Home Phone () _____

Street Address _____ Bus. Phone () _____

City _____ State _____ Zip _____

Family Doctor _____ Phone () _____

Family Dentist _____ Phone () _____

Health Insurance Co. _____ Policy # _____

HEALTH INFORMATION: To make your child's stay as pleasant as possible, we would appreciate information regarding his/her health and any medical problems he/she may have. Please complete in full.

1. Any food, drug, or other allergies (insect bites, pollen)?

_____ Yes _____ No Specify _____

reaction _____

2. Any existing medical condition (chronic or recurring illness?) _____

3. Is there any factor that makes it advisable for your child to follow a limited program of physical activity, i.e., heart condition, recent fracture, surgery, asthma or extreme fears?

_____ Yes _____ No

4. Any special dietary needs? _____ If yes, please call

_____ to discuss special dietary needs.

5. In order to protect your child from possible embarrassment, we would like to know:

Does he/she wet the bed at night? _____ Yes _____ No

Does he/she walk in his/her sleep? _____ Yes _____ No

6. Date of last Tetanus Shot: _____

7. Has your child been exposed to any communicable disease within the past 21 days:

_____ Yes _____ No If yes,

What? _____

8. Is your child bringing any medication or pills of any sort (including over the counter medication(s)

_____ Yes _____ No

If yes, the enclosed medication form must be fully completed, signed and returned.

Please read, and fill out and sign and return.

MEDICAL CONSENT: Please give your consent to medical care by signing in the space(s) provided below.

I consent to and authorize emergency and non-emergency medical care to be provided to my child in the event of a health problem, emergency or injury occurring during my child's attendance. I give my consent and authorization to the chaperones of his/her designee to use his/her judgment in seeking medical care for my child. I understand that the attempt will be made to contact me in the event that medical care is needed.

Date _____ **Signature of Parent/Guardian** _____

OPTIONAL: If you wish, for religious or other reasons, you may indicate your refusal to consent to certain medical care (e.g., blood transfusions) as follows:

Notwithstanding the above, I do not consent to the following diagnostic tests or medical treatment for my child: Specify _____

Signature of Parent/Guardian _____

PLEASE BE SURE THAT YOU HAVE READ THROUGH THE CONSENT FORM COMPLETELY AND CAREFULLY, AND HAVE SIGNED YOUR SIGNATURE IN THE APPROPRIATE SPACES.

THE HEALTH INFORMATION AND PERMISSION FORM IS REQUIRED BY EVERY STUDENT WHO IS PARTICIPATING IN THIS TRIP.

In case of an Emergency, please contact:

Name _____ **Relationship** _____ **Phone** _____

Name _____ **Relationship** _____ **Phone** _____

MEDICATION FORM- IF NEEDED , FILL OUT AND RETURN

Child's Name _____ Age _____

Medication Name: _____

Reason for giving: _____

Complete directions for giving medication: _____

Medication Name: _____

Reason for giving: _____

Complete directions for giving medication: _____

Medication Name: _____

Complete directions for giving medication: _____

Medication Name: _____

Complete directions for giving medication: _____

Medication Name: _____

Complete directions for giving medication: _____

Complete directions for giving medication: _____

The above information and directions for administration of all medication is complete and correct.

Parent/Guardian Signature: _____ DATE _____

Thank you for your attention to these details. If you have any questions or medical concerns that you would like to discuss, please feel free to call Mr. D'Alleva at 781-393-2228

Andrews Middle School
STUDENT TOURS
60 WEST AVENUE
VINEYARD HAVEN, MA. 02568
508-693-5078 800-331-7093
508-693-8627 fax

New York City **June 8-10, 2012**
CROWN PLAZA MEADOWLANDS
2 HARMON PLAZA
SECAUCUS, NJ
201-348-6900
studenttours@vineyard.net

DAY I - Friday, June 8, 2012

- 5:45 am Bus arrives at Andrews Middle School.
6:00 am Depart for New York City. Bring a morning snack and box lunch from home.
10:30 am Approximate time of arrival in New York. Bus to Harlem. Visit the Malcolm Shabazz Market (52 West 116th Street). Continue on to Strawberry Fields in Central Park (72nd & Central Park West). Eat your lunches from home.
12:45 pm Bus to Rockefeller Center - NBC awning on 49th Street between 5th & 6th Avenues. NBC Studios Tours reserved as follows:
1:45 pm & 2:00 pm
3:15 pm Bus to Pier 78 (West 38th Street & 12th Avenue).
4:00 pm Enjoy a NY Waterway Cruise.
5:30 pm Bus to Times Square. Visit the area.
6:30 pm Dinner at Planet Hollywood.
7:30 pm Bus to Rockefeller Center.
8:00 pm Visit the Top of the Rock Observatory.
9:30 pm Bus to your hotel. Hotel security 11:00 pm - 5:00 am.

DAY II - Saturday, June 9, 2012

- 7:30 am Breakfast at your hotel.
9:00 am Bus to the Museum of Natural History. Use the 81st Street entrance. Pick up your tickets at the lower level of the Rose Center at the Will Call desk to the left of the staircase.
12:00 pm Bus to the South Street Seaport. **Lunch at the South Street Seaport - own expense.**
2:00 pm Meet your NYC guide. Walk the Brooklyn Bridge as time permits.
3:15 pm Bus to the World Trade Center site.
3:30 pm Visit the World Trade Center Memorial.
4:45 pm Continue on to Times Square.
5:30 pm Your guide will leave you here. Visit Madame Tussaud□s.
7:00 pm Dinner at Bubba Gump□s (1501 Broadway between 43rd & 44th).
8:00 pm Visit Times Square without Guide.
9:30 pm Bus to your hotel for the night. Hotel security 11:00 pm - 5:00 am.

DAY III - Sunday, June 10, 2012

- 7:00 am Breakfast at your hotel. Pack your bus and check out.
8:00 am Bus to Liberty State Park.
9:00 am Security check - requested, pending availability. Ferry to Ellis Island. Meet your guide. Visit the island as time permits.
Ferry back to Battery Park.

- 12:00 pm Your guide will leave you here. Bus to the Bronx Zoo. Pick up **lunch - own expense**.
- 2:00 pm Board your bus for return trip to Andrews Middle School.
Dinner stop along the way using dinner allowance.
- 8:00 pm Approximate time of arrival in Medford.

On the day of your trip, your itinerary may have to be altered by your guides and/or drivers due to crowds, road closings and heavy traffic in New York.