



Big Sandy Rancheria- “Tribal Member Youth Trip” Field Trip Permission Form
“ Great America- Santa Clara, CA”

Meet at: (CIRCLE ONE) BSR GYM -OR- Hwy. 41/RD145 (4 Corners)

Transportation: (CIRCLE ONE) Charter Bus -OR- Personal Vehicle

Date: Tuesday- June 24, 2025

Time: 6:00 AM- Breakfast Burritos

7:00 AM- Depart BSR GYM

7:30 AM- Pick up Hwy 41/Rd 145 (4 Corners)

7:40 AM- Depart Hwy 41/Rd 145 (4- Corners)

11:00 AM- Great America, Santa Clara, CA

6:00 PM- Depart Great America

7:30 PM- Arrive Casa De Fruta (30 min Dinner Break)

10:00 PM- Dropp Off at Hwy 41/ Rd 145 (4 Corners) * Time is Approximate.

10:30 PM- 11:00 PM – Arrive at BSR GYM * Time is Approximate.

ATTENTION: by submitting this form, with signature below, you are guaranteeing you will be attending this trip. Failure in notifying the Tribe within a 24- hour period of cancellation, you will be held financially responsible for tickets or passes not used.

Child must be BSR Enrolled Tribal Member * Child must be between ages 5-17 * Child must be taller than 44” * Child must not have special accommodations * Minors who are pregnant or may think they are, many not attend * Child must be on best behavior AT ALL TIMES * Child may bring a pillow/blanket, with them on trip. BSR is **not** responsible for any items lost or stolen.

Great America is “CASH LESS”, Simply swipe or tap your credit card, debit card, smart phone, Apple Pay or Google Pay. Cash to Card kiosks are located throughout the park and can convert your cash to a prepaid debit card you can use anywhere.

Chaperone must be 25 years or older and accept full responsibility for the safety of the children they are assigned. Chaperones are to be of good character & mature enough to oversee and control the children they are assigned. “First come first serve” only 130 tickets will be purchased, REMEMBER, this trip is for the kids. Deadline: Permission Slip must be returned before and no later than: June 23, 2025 at 12:00 PM.(deadline may change with ticket availability).

Children Names:

CHAPERONE: _____

Cell # on Trip: _____

I give my permission for my child(ren) to attend Tribal Trip and give permission for my child(ren) to receive medical treatment.

Parent/ Guardian Signature: _____

In case of emergency, please contact: _____, **Phone/Cell:** _____