

# EDISON HIGH SCHOOL

## Freshmen and Sophomore

This permit is good only when the student's sport is in its sport season  
**ATHLETICS OFF-CAMPUS LUNCH PERMIT**  
2020 - 2021

This form is to acknowledge that \_\_\_\_\_

\_\_\_\_\_  
Please print last name, first name

\_\_\_\_\_  
Student ID number

will have the privilege to go off campus during lunch period as long as the following conditions are met:

Sport \_\_\_\_\_ Period \_\_\_\_\_

1. The student will return to school for practice or athletic event as directed by their coach. Note: If a student becomes ill while off campus, a parent/guardian must call the Attendance Office to check the student out. The student must present a parent's note to the Attendance Office upon return to school. Failure to present the parent's note will result in the absence being treated as truancy.
2. The student will return to school on time. Failure to return on time will result in the off-campus pass being revoked.
3. *Students may not go to the Community Center, parks or green belt adjacent to Edison High School.*
4. *The student must go home for lunch and the student/parent must provide transportation.*
5. No food, drink, or litter is to be brought into the building or left in the parking lot.
6. Students exercising off-campus lunch privileges must have their ID card with lunch permit in their possession at all times.
7. Students must show their off-campus permit to supervision staff to be allowed to leave campus.
8. The school assumes no liability for any accident or injury incurred in the exercise of this permit.
9. This permit must be renewed at the beginning of each new sport season and is only available if the student continues to be on an athletic team.

Students exercising off-campus lunch privileges are *subject to rules of student conduct* applicable during the regular school day. The abuse of any of these provisions may result in the termination of the off-campus lunch permit and/or other disciplinary consequences.

Parent/Guardian

\_\_\_\_\_  
Home  
Address \_\_\_\_\_

\_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact Information:

Name \_\_\_\_\_ Phone \_\_\_\_\_

**I have read and understand the Off-Campus Lunch Policies and agree to the stated conditions.**

---

*Student Signature*

**We have read and understand the Off-Campus Lunch Policies and we grant our son/daughter permission to go home for lunch.**

---

*Parent Signature*

*Date*

***Please return signed form to Supervision office***