

Daily Bulletin

Friday, June 15, 2018

Periods: 1 2 3 4 5 6

TODAY'S LUNCH

Mushroom pizza, sausage onions & peppers sandwich, BBQ rib sandwich, ham & cheese panini
Available Daily: Sandwiches & salads, plain & pepperoni pizza, soft tacos, hamburgers, turkey & veggie burger

ANNOUNCEMENTS

DURFEE'S HISTORY ABROAD CLUB is hosting a "Bag 2 School" fundraiser on Saturday, June 16th. We asking for donations of unwanted clothes and textile items including backpacks, purses, hats and shoes. Donations can be dropped off between 9-12 at Durfee's Field House on June 16th or left at the Summit in the cafeteria on Friday, June 15th.

OPEN GYM will be available Monday through Friday from 6:45AM to 7:45AM in the field house. All students who come to participate will sign in and need to show their student ID to staff.

BUS PASSES can be purchased in the main office before or after school with a **CHECK ONLY** payable to City of Fall River School Department. Charlie Cards are \$28. or \$7.50 for a ten ride pass.

DURFEE MORNING LAP SWIM will be held on Monday, Wednesday, and Fridays from 6:00 AM to 7:00 AM in the pool. All staff and students are encouraged to participate. Please contact Chris Poliseno with any questions.

MEETINGS

BIO-BUILDERS & KNIT WITS will meet every Wednesday right after school in room 480.

TECH CLUB will meet every Monday in room 33. All are welcome to attend and check it out! See Mr. Bigelow in room 33 if you have any questions.

ART CLUB meetings will be held every Tuesday at 2:45 in Room 82. Please see Ms. Arsenio with any questions. All are always welcome!

CLASS OF 2019 MEETINGS will be held every Tuesdays in Room 470. All are welcome!

The **SOPHOMORE CLASS MEETING** will be held Thursday after school in room 373. Please attend and bring a friend! Please see Ms. Pereira if you have any questions.



AAA Driver Training

BMC Durfee/Fall River Accelerated Classes:

July 9 – 13, 2018	July 30 – August 3, 2018	August 20 – 24, 2018
Monday - Friday	Monday - Friday	Monday - Friday
8:30 am – 3:00 pm	8:30 am – 3:00 pm	8:30 am – 3:00 pm

Class Location:
BMC Durfee High School
360 Elsbree Street, Fall River

REGISTER TODAY!



1-855-222-1050
AAA.com/DriverTraining

2018 Final Exam Schedule

Friday, June 22:

7:55 - 9:25: Period 1 Final Exam

9:30 - 11:00: Period 2 Final Exam

Monday, June 25

7:55 - 9:25: Period 3 Final Exam

9:30 - 11:00: Period 4 Final Exam

Tuesday, June 26

7:55 - 9:25: Period 5 Final Exam

9:30 - 11:00: Period 6 Final Exam

Wednesday, June 27

7:55 - 9:25: Makeup for Final Exam *(Need to arrange with office and teacher)*

9:30 - 11:00: Makeup for Final Exam *(Need to arrange with office and teacher)*

Thursday, June 28

7:55 - 11:00 - Last Day



FREE



BOYS AND GIRLS LACROSSE CLINIC

WHEN: Saturday June 23rd 2018

WHERE: Durfee High School- Practice Turf

WHO: Fall River Residents - GRADES 7 – 12

TIME: 1:00 - 2:30 PM

Clinic will be 90 minutes in length and include warm ups, skill development, drills, non-contact live action. No experience needed! Day of Fun and Excitement!

***Please bring your own equipment if you have it. There will be some equipment on site if needed.**

INSTRUCTORS:

Superintendent Malone will be leading the Male clinic and Debra Morris from "Stix 4 Chix" will be leading the Female Clinic.

LACROSSE CLINIC REGISTRATION FORM

NAME: _____ AGE: _____ GRADE: _____

ADDRESS: _____

PARENT/GUARDIAN NAME: _____

HOME NUMBER: _____ CELL NUMBER: _____

SCHOOL ATTENDING IN 2018/2019 _____

Waive and Release

Parent(s)/Guardian's Assumption of Risk and Acknowledgment: I verify that my child has been checked by a licensed physician and is physically able to participate in the clinic. In addition, I understand that attendance at a lacrosse clinic carries certain risks of injury and I assume all risks resulting from participation in this camp.

Signature of Parent/Guardian _____ Date _____

Treatment Waiver: I / We, being the legal guardian(s) of the camper, authorize the Durfee High Athletic Trainer, to request medical treatment as necessary, to ensure the well-being of my/our dependent.

Signature of Parent/Guardian _____ Date _____

Emergency Contact Information

Name _____ Relationship _____

Cell Phone _____ Home Phone _____

ANY HEALTH CONDITIONS THAT THE STAFF SHOULD BE MADE AWARE OF PLEASE LIST THEM BELOW (i.e. Concussions, Allergies, heart conditions, epilepsy, neurological disorders, asthma (inhaler needed), fractures or sprains, dizziness/fainting, ect.)

1. _____
2. _____
3. _____
4. _____
5. _____

***PLEASE SEND REGISTRATION FORM TO:
DURFEE HIGH SCHOOL ATHLETIC DEPT. C/O BRAD BUSTIN 360 ELSBREE ST. FALL RIVER, MA 02720 (CAN ALSO REGISTER THE DAY OF THE CLINIC ON SITE)**