

FIELD TRIP PERMISSION FORM

Teacher: **Amy Dugan** Grades: **6**

Destination: **Glen Helen Ecocamp**

Address: **1075 State Route 343 Yellow Springs, Ohio 45387**

Phone: **937-767-7648**

Purpose: **Outdoor Education**

Dates: **September 18-20**

Cost: **\$120 (check payable to STM)**

Method of Transportation: **West Clermont Bus (Provided by PTO)**

Departure from School 9/18: **9:00 a.m.**

Return to School 9/20: **1:30 p.m. (pickup held at the picnic shelter)**

(Students will be dismissed upon arrival and will not return to class.)

Meals: **Wednesday, September 18: Lunch and dinner provided.**

Thursday, September 19: Breakfast, lunch, and dinner provided.

Friday, September 20: Breakfast and lunch provided.

Dress Code: **Camping/Outdoor Clothes (see packing list)**

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PLEASE COMPLETE AND RETURN THIS PORTION TO SCHOOL WITH PAYMENT

I hereby request that my child _____, Grade _____,
be permitted to participate in the field trip to Glen Helen on September 18-20, 2019.

I agree to hold harmless the staff of St. Thomas More School and its employees and volunteers and the Archdiocese of Cincinnati from all liability arising from or related to any illness or injury incurred by my child while participating in or traveling to or from this activity. I understand that my child is obligated to cooperate with all staff and volunteers assisting or directing this activity or transportation.

Parents' Emergency Phone Numbers _____ or _____

Parent/Guardian Signature _____

Adult authorized to pick up student upon return to STM on Friday 9/20 at 1:30 p.m.
Transportation must be provided. Students will not return to class.

Name _____ Cell phone number _____