

St. Thomas More School
788 Ohio Pike
Cincinnati, OH 45245
FIELD TRIP PERMISSION FORM

Teachers: **Miss Poliak and Mrs. Biernat**

Grades: **1B & 1P**

Destination: **Caldwell Nature Center**

Address: **430 W. North Bend Rd Cincinnati 45216**

Phone: **(513) 761-4313**

Purpose: **To learn about Native Americans, Mixtures, Maple Syrup**

Date: **Wednesday, February 6**

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

Departure from School: **8:35 am**

Return to School: **1:00 pm**

Meals: **Pack lunch and drink (no pop)**
Brown bag lunch available for purchase from STM cafeteria (*see reverse*)

Dress Code: **STM Spirit Wear shirt, jeans, and old shoes**
(appropriate for outdoor weather)

Cost per Student: **\$5.00 (no cash, check payable to STM)**

Emergency Phone Number where students can be reached: **513-753-2540.**

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PLEASE COMPLETE AND RETURN THIS PORTION TO SCHOOL

I hereby request that my child _____ who is in **Homeroom** _____
be allowed to participate in the field trip to **Caldwell Nature Center** _____.

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 _____