



PERMISSION FORM FOR STUDENT FIELD TRIP

Dear Parents:

The following trip has been arranged to complement the instructional program of your student. This trip has been approved according to the Board of Education Policy and guidelines established by the Superintendent of Schools. All school system policies and school rules are in effect for the duration of the trip. If you have any questions, please feel free to contact the Teacher-In-Charge.

Please complete the bottom portion of this form, **detach** and return with cash or check to the Teacher-In-Charge. If you can chaperone, please check the box at the bottom and provide your contact information.

The HCPSS Finance Office has contracted with the Envision Payment Solutions, Inc. for the electronic collection of check payments. If the check is returned unpaid, Envision Payment Solutions, Inc. will assess a \$35 fee allowed by Maryland state law and charged as an electronic fund transfer.

School:	Thomas Viaduct Middle School		
Destination:	Hammond HS		
Objective of the trip:	Students will be exposed to their HS for the 2017-2018 school year		
Class/Group:	8th Grade Class		
Departure date:	June 7th, 2017	Time:	9:00 am
Return Date:	June 7th, 2017	Time:	11:30 am
Bus Company:	Vienna's Bus Company		
Public Transport:			
Cost per student:	\$ Free		
Checks payable to:	Thomas Viaduct Middle School		
Due Date:	Thursday, May 18th		
Meal Arrangements:	Students will be back in time for lunch		
Appropriate Attire:	N/A		
Total # of Students:	60		
Anticipated Ratio of Chaperones to Students:	1:20		

This trip will be:	
Student Day <input checked="" type="checkbox"/>	Extended Day <input type="checkbox"/>
Overnight <input type="checkbox"/>	Non School Day <input type="checkbox"/>

If the trip returns after the regular student day, the parent will pick up the student at the school within 15 minutes of return.

Alternate plans in case of postponement or cancellation:
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There may be a separate attachment detailing the itinerary, special clothing or cash requirements, as well as any additional rules or procedures. Please contact the Teacher-In-Charge as soon as possible if you have any special needs regarding this trip.

Teacher-In-Charge: Nicole Raines

Contact number: 410-313-8247

THE HOWARD COUNTY PUBLIC SCHOOL SYSTEM RESERVES THE RIGHT TO CANCEL A TRIP AT ANY TIME IN ORDER TO ENSURE THE SAFETY OF BOTH STUDENTS AND STAFF MEMBERS. IF SUCH A CANCELLATION OCCURS, THE SCHOOL SYSTEM IS NOT RESPONSIBLE FOR ANY FINANCIAL LOSS INCURRED BY THE PARENT. THE SCHOOL SYSTEM IS ALSO NOT RESPONSIBLE FOR ANY LOST OR STOLEN PERSONAL ITEMS.
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I GRANT PERMISSION FOR _____ TO GO TO Hammond High School
(PRINT Student Name) (Destination)
ON June 7th, 2017 . I RECOGNIZE THAT HOWARD COUNTY PUBLIC SCHOOL SYSTEM CANNOT BE HELD
(Date)
RESPONSIBLE FOR CONDITIONS BEYOND THEIR CONTROL. PARENT SIGNATURE _____ DATE: _____

I AM AVAILABLE TO CHAPERONE AND ACCEPT THE DUTIES AND RESPONSIBILITIES OF THE POSITION.
CHAPERONE NAME _____ SIGNATURE _____
CHAPERONE PHONE NUMBER _____ CHAPERONE EMAIL: _____