



Maplewood Middle School

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Maplewood, NJ 07040

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Dara Crocker Gronau
Principal

Louis Brown
Assistant Principal

Dion Patterson
Assistant Principal

FIELD TRIP PERMISSION FORM

Dear Parent or Guardian,

As part of our school program we are planning the field trip described below. If you wish your child to participate in this experience, please complete this form and return it to the teacher.

This form and payment must be returned by June 15, 2018

Date of Trip: June 20, 2018

Destination: Maplewood Community Pool; 187 Boyden Avenue, Maplewood NJ 07040

Purpose: The purpose of this trip is to celebrate a successful school year and foster positive peer relations.

Method of Transportation to the pool only: walking

Time: 9:40-12:30 **Departure:** 12:30 **Students will be dismissed from the pool. NO SUPERVISION WILL BE AVAILABLE AFTER 12:30pm.**

Teacher: 6th Grade Teachers

Cost: \$2.00 (Cash Only)

Special Requirement(s): Students should wear (or bring) a bathing suit, sunscreen, and bring a towel. Lunch is **NOT** provided on half days. Glass bottles are prohibited.

-----DETACH AND RETURN BOTTOM ONLY-----

I hereby give consent for my child _____ to participate in the field trip above. _____
Student's Name (Print First & Last Name)

Indicate how your child will be getting home:

Walking _____ with whom? _____

Being picked up _____ by whom? _____

Other _____ please explain _____

Emergency phone number, where I can be reached on the day of the trip _____

If I cannot be reached by phone, I hereby authorize emergency medical treatment in the event of accident or sudden illness.

Signature: _____
(Parent or Guardian)