**` *Pending School Committee Approval***

**LINCOLN PUBLIC SCHOOLS**

 **Ballfield Road**

**Lincoln, Massachusetts 01773**

**781-259-9400**

**Field Trip Permission Slip**

**6th Grade Field Trip to Museum of Science Overnight Program**

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| **Please return Permission Slip & Health Form by Monday, March 9, 2020** ***Note: These forms are 2 sided: both sides need to be completed for each student.*** |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_hereby consent to my child's participation in the field trip on Thursday, April 2-Friday, April 3 to the Museum of Science, Boston. We will depart school on Thursday after lunch. We will be using the commuter rail for transportation. Student will purchase their dinner in Fanueil Hall before walking over to the Museum of Science. We have Charlie Cards for the T in the event that weather requires alternative transportation. A light snack will be provided in the evening, and breakfast in the morning will be provided by the Overnight Program.

I also understand that child may not bring any personal electronic device that can be connected to the internet, including but not limited to such items as iPods & music players, iPhones or any cellular phone, digital book readers, computers, tablets, game players, Apple Watches etc. Students who bring these devices will be asked to leave the trip, and you will need to make arrangements to pick up your son or daughter.

I hereby also consent to whatever arrangements are made for my child, generally consistent herewith, and any reasonable arrangement in case of emergency, including arrangements for emergency transportation and/or medical care, which is deemed necessary in such situation by the teacher, or if unavailable, by any other adult supervisor. I understand that reasonable precautions for safety will be taken.

**The cost of the Trip is be $82.00, and checks should be made payable to the Town of Lincoln.**

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**Overnight Field Trip to the Museum of Science April 2th – 3th , 2020**

**Printed Name of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**Printed Name of Parent/Guardian Date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent/Guardian Emergency Phone Number**

If you need financial assistance, please email David Trant at dtrant@lincnet.org and I will send you the

 Lincoln Public School Districts aid request packet.

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I would like to make a small donation to be put towards those families who request financial assistance.

$5.00 $10.00 $15.00 other: \_\_\_\_\_\_\_\_\_\_

Please add this amount to your check.

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Parent Chaperones are needed; males in particular. There will be no additional charge to you. You do not need to be available for both days, but it is great if you are. Once you volunteer, I will send you an email with more details and specifics. You will need to have an up-to-date CORI on file with the public schools. Please see Jennifer Doherty in the Brooks Office regarding your CORI.

**If you are willing to chaperone please email; dtrant@lincnet.org.**