



# Field Trip Permission Form

Dear Parent or Guardian,

Below, please find the information for this week's optional field trip. After registering at the Welcome Center, please complete the attached permission slip and return it to the Sign In/Out table or the Welcome Center. Remember, a signed permission slip does not guarantee a spot on the trip – you must register your child and take care of the payment at the Welcome Center.

**Camp Groups: PK, K, 1, 2**

Date: **Wednesday, June 26<sup>th</sup>**

Venue: **Aquatics and Fitness Center – Strange World of Reptiles**

Cost: **\$15 per camper**

Cash or check payable to: **ESCNJ**

Begin Exhibit: **9:30am**

End Exhibit: **11:00am**

For questions or concerns regarding this field trip, please contact Katelyn Dauphinee, Summer Camp Director at (732) 317-0333 x7786 or [KDauphinee@escnj.k12.nj.us](mailto:KDauphinee@escnj.k12.nj.us).

*Save this part of the form for future reference.*

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*Sign this portion of the Permission Slip and return it to the Sign In/Out Table or the Welcome Center.*

**Child's Name** \_\_\_\_\_

**Trip Date: Wednesday, June 26<sup>th</sup>**

**Camp Groups: PK, K, 1, 2 ONLY**

**Trip Time: 9:30am-11:00am**

**Trip Location: Aquatics and Fitness Center – Strange World of Reptiles**

\_\_\_\_\_ **My child has my permission to attend this field trip and receive emergency medical treatment if necessary. In the event of an emergency and I cannot be reached, please contact the person listed below:**

**Emergency Contact** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Parent/Guardian Name (Printed)** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



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**Camp Groups: 3, 4, 5, 6, 7, 8, 9 ONLY**

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