

10/15/09

Dear Parent/Guardian,

Our School has planned a field trip to Wallington Bowling Lanes
On Wednesday, October 21, 2009. We expect to leave the school cafeteria at 3:15pm and
will return at 6:00pm.

Cost per student will be \$10.00, which includes transportation and bowling.

Children may bring their own snack or purchase food at the refreshment stand.

In the event your child should become ill or be injured during the trip, the chaperones
will make every effort to immediately contact you (parent/guardian) by phone and will
arrange for required medical attention at the location. Since most hospitals and physicians
require parental authorization for treatment, the attached permission slip includes your
authorization to permit necessary emergency treatment.

Please sign the form below and return it to Mr. Facendola by Tuesday, October 20, 2009.

Sincerely,
Mr. Philip A Facendola

I have read all of the information concerning the field trip to Wallington Bowling Lanes
on Wednesday October 21, 2009 and I have discussed it with my child. I have also given
my child, _____, my permission to attend this field trip,
and, hereby authorize Mr. Solimo or one of the teachers supervising the trip to arrange
for such medical attention for my child as he/she deems necessary in the event of illness
or injury. I am enclosing \$10.00 for the cost of the trip (**Make checks payable to the
Moonachie Board of Education**)

I will also pick up my child in the school cafeteria at 6:00pm.

Signature of Parent/Guardian _____ Date _____

Home tel. # _____ Emergency tel # _____

Grade of child _____