



DUTCHESS COUNTY SCHOOL DISTRICTS

Field Trip Permission Form

Your child's class will be attending a field trip to: Dutchess Stadium

<i>Date</i>	Thursday, October 5, 2017	<i>Time</i>	9:00AM-12:30PM
<i>Location</i>	Dutchess Stadium, 1500 NY-9D, Wappingers Falls, NY 12590		
<i>Cost</i>	None		
<i>Transportation</i>	School provided transportation		
<i>Notes</i>	Lunch will be provided. Please select from the following choices*: <ul style="list-style-type: none"> • Chicken Caesar Wrap with water & apple • Veggie Wrap with water & apple • Gluten-free option (above choices available w/ GF roll) • Lunch provided by parent/guardian *The above selections are not guaranteed allergen free.*		

Please return this permission slip by: Monday, September 18, 2017

As the parent/guardian of (student name) _____

to attend the field trip to Dutchess Stadium on Thursday, October 5, 2017

from 9:00AM to 12:30PM

In case of an emergency, please contact:

Name _____ Phone _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (Please Print) _____ Date _____