



Accredited by the Middle States Association/Council on Elementary and Secondary Education

Bridgehampton Union Free School District

P.O. Box 3021, 2685 Montauk Highway, Bridgehampton, NY 11932

Telephone: (631) 537-0271

www.bridgehampton.k12.ny.us

Facsimile: (631) 537-9038

FIELD TRIP PERMISSION FORM

DATE January 16, 2019 WE ARE PLANNING A FIELD TRIP

TO The Music Box Theatre - Dear Evan Hansen

TRANSPORTATION WILL BE PROVIDED AND THERE WILL BE ADEQUATE SUPERVISION.

IF YOU WISH TO HAVE YOUR CHILD TAKE PART IN THIS ACTIVITY, PLEASE INDICATE BELOW. SIGN AND RETURN TO US AS SOON AS POSSIBLE.

PURPOSE OF THIS FIELD TRIP IS: Character / Social Emotional Ed.

DEPARTURE TIME: _____

3pm

RETURN TIME: _____

1am

YOUR CHILD WILL BE RESPONSIBLE FOR BRINGING THE FOLLOWING:

Dinner/snacks

TEACHER(S) Sanchez, Doscher, Elliott, Nichols, Rivera

Please fill in permission slip below. Tear on dotted line below and return to school.

STUDENT NAME _____ HAS MY PERMISSION

TO GO ON THE FIELD TRIP TO _____ ON (DATE) _____.

IN THE EVENT OF AN EMERGENCY, PLEASE CONTACT THE FOLLOWING:

PRIMARY CONTACT

NAME: _____ RELATIONSHIP: _____

Address: _____ Telephone: _____

ALTERNATE CONTACT

NAME: _____ RELATIONSHIP: _____

Address: _____ Telephone: _____

SIGNATURE OF PARENT OR GUARDIAN _____