

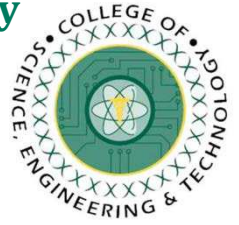


The College of Science, Engineering, and Technology Health and Science Summer Academy

FIELD TRIP PERMISSION SLIP

Dates: June 25th – July 20th 2012

(PLEASE PRINT CLEARLY OR TYPE)



I give permission for my child _____ to attend the field trips associated with the NSU College of Science, Engineering, and Technology Health and Science Summer Academy. The purpose of the field trips is to expose participants to the various aspects of Health and Science. Participants will be transported to and from the field trip by buses. Lunch will be provided.

NOTE: Your child will need to bring money for any additional items, souvenirs etc.

Parent/Guardian's Signature _____

Participant's Signature _____

Emergency Contact Person _____

Emergency Contact Number _____