

# Buddy Bowling Field Trip - Permission Slip

Please sign this authorization slip and return the bottom half to your child's teacher with payment by **Friday, January 22, 2016.**

Date of Trip: Thursday, January 28, 2016

Destination: Brunswick Zone, 3111 River Road, River Grove, IL  
Bus transportation will be provided to and from Brunswick Zone.

Note: There will be NO PARKING on the 800 block of Clarence. Buses will park here.

Lunch: All students will be at school for lunch. Pizza, water and fruit will be provided.

	<b>GROUP 1</b> K, 1 <sup>st</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , 8 <sup>th</sup>	<b>GROUP 2</b> 2 <sup>nd</sup> , 3 <sup>rd</sup> , 6 <sup>th</sup> , 7 <sup>th</sup>
Departs School	9:00 am	11:30 am
Returns to School	11:30 am	2:00 pm
Lunch	After bowling	Before bowling

Dress: Sports jersey or gym uniform. Students **MUST** wear sneakers with white or light colored soles. No black soles. Follow guidelines for out-of-uniform day in the Handbook.

Cost of Field Trip: \$10.00 per student.

Please turn in fees (checks payable to *Ascension Home and School*) and permission slip **no later than Friday, January 22nd.**

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## Clip and Return with Payment

\*Please provide one slip and one check for EACH child attending.

\*Additional slips may be requested from the school office or downloaded from the website.

\_\_\_\_\_ I acknowledge my child *will* participate in Buddy Bowling on Jan 28, 2016.

\_\_\_\_\_ My child *will not* participate in Buddy Bowling.

Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_

Room #: \_\_\_\_\_

In the event of an emergency, I give my permission for my child to receive emergency transportation and medical treatment.

Parent/Guardian Name and Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Cell Phone: \_\_\_\_\_