

**Anne Arundel County Public Schools**  
**FIELD TRIP PERMISSION LETTER**

**DIRECTIONS:** *This form is to be completed and presented to the principal with the Field Trip Request Form and the Field Trip Study Guide.*

Dear Parents/Guardians: OMMS STEM Student

Date Submitted April 4, 2013

The STEM Magnet Program has been given permission to take an overnight fieldtrip to Arlington Echo Outdoor Education Center for the Summer Bridge Program. The rising 6<sup>th</sup> graders will attend on June 25-26 or July 16-17, 2013.

Arlington Echo Outdoor Education Center is located at 975 Indian Landing Road, Millersville, Maryland 21108 and the phone number is 410-222-3822.

Transportation only to the fieldtrip will be provided by Crofton Charters, a properly insured carrier. The cost of the trip will be zero dollars per student. Students need to arrive to Old Mill Middle South by 7:00 AM on the day of the fieldtrip to be prepared for a 7:30 AM departure.

Students will be pick-up by parents/guardians at Arlington Echo at 6:30 PM on the following day of the fieldtrip.

Please be advised that **ALL** field trips are subject to cancellation **AT ANY TIME** by the Board of Education, the Superintendent of Schools or the Superintendent's designee, when in their sole discretion, cancellation is in the best interests of students and staff. In such cases, parents and students bear the risk of loss for financial or other commitments they have made. The Board of Education, its employees and agents will not be responsible for any losses arising from cancellations.

The group will be accompanied by teachers and adult chaperones in accordance with the established ratio of adults to the number of students taking the trip. The students will leave the school at 7:30 AM and you will pick your child up at Arlington Echo on the second day of the trip at 6:30 PM. Please sign and return the lower part of this form to the school if your child has your permission to go on this trip.

Sincerely,

Marie Hartman  
STEM Lead Teacher

APPROVED: Ms. Page  
Principal

Old Mill Middle School

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**PERMISSION SLIP**

**Please complete and return to the classroom teacher within five school days.**

\_\_\_\_\_ has my permission to make the trip to \_\_\_\_\_  
(Name) (Place)

on \_\_\_\_\_. I (we) believe that the necessary precautions and plans for  
(Date)

the care and supervision of my child during this trip will be taken.

\_\_\_\_\_  
Phone number in case of emergency

\_\_\_\_\_  
Parent/Guardian Signature

***Please attach information on pertinent physical or medical concerns that the staff should be aware of (i.e., allergic to bee stings, etc.).***