Ann Arbor Public Schools Parent Notification and Consent Form For Field and /or Athletic Trips

Dear Parent:	
Please complete this form and return to me.	
I hereby give permission for my child*	
to go to Huron Choir Camp	nt's full name Grade
on the field or athletic (circle one) trip described below. © Interlochen Center for the	arts
I understand that my child will leave on Tue Que	17 , 7:30 Am
And is expected to return on Mon Qua	23 , 2:00 pm
In granting this permission, I assume full responsibility for any damag if it is determined that my child needs medical or dental treatment I winecessary by a physician or dentist.	
I further agree that if the behavior or health of my child should make i return time and date, I will be responsible for those expenses. I unders an adult.	
There will be chaperones accompanying the student or groups of stude whenever they leave the activity site.	ents not only during the scheduled activity but
Your child will need the following:	
Lunch Boots Dall Luggar	\$ to Lunch on Way up
Principal or authorized staff	Huron High School
Signature of parent or guardian	Date of Signature
Address	Home Phone number
City	Work Phone number
**This includes children under guardianship, ward, etc. (158-041) 05/2010	Cell Phone number