



**TO ALL 6TH GRADE STUDENTS.... IT IS FIELD TRIP TIME!!!
YOUR TEACHERS HAVE PLANNED AN EXCITING DAY AT THE
SHORE CLUB IN HULMEVILLE, PA.**

On Wednesday, May 20, 2015, we will be heading to The Shore Club for a day of fun in the sun. This will include swimming, basketball, volleyball, soccer, miniature golf and many other fun activities. The best part is that the food is included in the price . . . and it is "all you can eat" from 11:00 a.m. to 1:00 p.m.

What do you need for our field trip?

- School appropriate bathing suits and a towel
- Plastic bag for your wet clothes
- Sunscreen and a hat
- Spending money for the arcades (this is not included in the admission price)
- A good attitude!

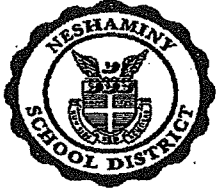
If you are planning to spend a fun day with your friends, then join us on May 20, 2015. The cost of the trip will be \$25.00 due by April 30, 2015. Please make checks payable to Maple Point – 6th Grade. All students who are going on this trip must complete the attached field trip permission form and return it to their homeroom teacher with their payment.



Student's Name _____
(Please print)

Homeroom _____

Amount _____



Neshaminy School District

2001 Old Lincoln Highway • Langhorne, Pennsylvania 19047-3295

Robert L. Copeland
Superintendent of Schools

Field Trip Form Parent/Guardian Permission

_____ has my permission to travel to
_____ student name
_____ by _____ on _____
_____ trip destination bus, train, car, etc. date

Emergency Information

Parent/Guardian can be reached at the following telephone numbers all day on the day of the trip.

_____ mother's home, work or cell number father's home, work or cell number

In the event no one is available at the above listed numbers, please contact:

_____ name/relationship to child home/cell number

My child has the following allergies/medical condition the staff needs to be made aware of:

Emergency Medication to be carried by student on the trip

(Asthma Multi-Dose Inhaler or Epi-Pen)

Medication Name: _____ Dosage: _____

Time: _____ Special Instructions: _____

Students on Daily Medication

Please indicate below regarding your child's daily medicine dose for the day of the field trip:

- _____ My child may omit his/her dose for the day of the trip.
- _____ My child may take the dose when he/she returns to school.
- _____ I am chaperoning the trip and will administer the medication to my child.

I have completed the above permission for my child's participation in this school trip. In the event of an emergency, I give permission for my child to be taken to the nearest hospital for emergency treatment.

Parent/Guardian Signature

TA Devlin/Shore Point Forms/Field Trip Form