

Regional School District 13 Middlefield - Durham

**FRANK WARD STRONG MIDDLE SCHOOL
P.O. Box 435, 191 MAIN STREET
DURHAM, CT 06422**

Office 349-7222 Guidance 349-7255 Fax 349-7225

"Strong Students Shape Tomorrow"

Scott D. Sadinsky, *Principal*
Rebecca Sinusas, *Guidance Counselor*

Team Leaders: Lindsay Banas, Emily Del Grego,
Melissa Rosenthal & Linda Micowski

Date: **March 9, 2017**

I give _____ my permission to go on a school-sponsored trip to **Camp Jewell—YMCA, Colebrook Connecticut on June 1-2** We will leave school at **Thursday, June 1st at 9:00A.M.** and plan to return at approximately **Friday, June 2nd around/before 7:45P.M.**

Transportation will be furnished by:

_____ X _____ School Bus

_____ Chartered Bus

I also give my permission for medical care to be administered in the event of an emergency.

My child is allergic to the following:

He/she is currently taking _____ medication.**

**Note: a separate medication form (last page of packet) needs to be turned in to administer at camp.

Emergency phone numbers where you can be reached during the trip:

_____ (best phone number at night)

The cost of the trip is **\$165.00 (make checks payable to Strong School)**.

Payment is due: all 165.00 on April 4; OR 82.50 on April 4, and 82.50 on May 8

Parent/Guardian signature: _____

Teachers: The Seventh Grade teachers at Strong School, Dan Carcaud, 7th Grade Advisor

PLEASE RETURN THIS FORM TOGETHER WITH YOUR PAYMENT

Revised 08/2015

March 9, 2017

Dear Parent(s):

Please indicate below whether your child has permission to swim at Camp Jewell. Swimming will be permitted only during supervised times. At least one certified Camp Jewell lifeguard will be on duty.

Please sign below, and have your child return the form to his/her Social Studies teacher by Tuesday, April 4.

Sincerely,

□

Dan Carcaud

7th Grade Advisor

Student Name: _____

____ My child **has** permission to swim at Camp Jewell

____ My child **does not** have permission to swim at Camp Jewell

Parent Signature