

## SAINT JOHN PAUL II SCHOOL Field Trip Permission Form

Thoolatown C	to: Metro Movies - 'The Star'
Your child's class will be attending a field trip t	to: Metro Movies - The Title
Teacher supervising: Melanie Bra	ickner
Date 11/30/17	Time //2/5
Location Middle town, Ct	
Cost 5 00	•
Transportation Walk	Carle or drink
Notes do not send	money for snacks ordrink E before we leave and
Please Ch	before we leave and
We will have elices.	
lunch after.	
Please return this permission slip by: Wed	11/29/17
I give permission for my child	in room
to attend the field trip to Metro Mov	nes on 11/30/17
from 11:15 to 12:45	
Enclosed is \$ 5.00 to cover the cost	t of the trip. (Exact cash or check made payable to school.)
In case of an emergency, I give permission for a emergency, please contact:	my child to receive medical treatment. In case of such an
Name	Phone
The Caracaterist Color of the Section 1	