

St. Martin's Lutheran School

Field Trip Permission Slip

Grades K,1, and 2

Destination: Ferguson's Apple Orchard
Grover Ln, Galesville, WI 54630
Phone: [\(608\) 539-4239](tel:6085394239)

Date: Tuesday, September 26, 2017 (Johnny Appleseed's birthday)

Departure Time: 10:30am
Return Time: 1:30pm

Cost: There is no cost for our students since our fundraisers cover that cost. It is four dollars for parents.

Dress: Dress for the weather, proper footwear – tennis shoes

Your child will **need a sack lunch and drink** to take along and eat while at the orchard.

Transportation: We will need parent drivers. Please indicate below if you are able to drive. Your insurance information needs to be on file in the office.

Please return this slip by
Thursday, September 21, 2017

I give my permission for (child's name) _____ to attend the activity described above. I understand that all safety precautions will be taken for the protection of my child. He/she has assured me that his/her conduct on this trip will be a credit to him/her and St. Martin's Lutheran School. I will not hold the school, drivers, or host liable in case of an accident during transportation or participation.

(Parent/Guardian Signature)

(Date)

_____ Yes, I can drive and my vehicle can safely transport _____ passengers.

_____ Unable to drive this time.