Field Trip Information for the Sixth Grade

Who: Sixth Grade
What: Theatre and Lunch
When: December 6th Departure 9:00 AM  Return: Regular dismissal
Where: People's Light, Malvern, PA and Bucca di Beppo, Exton, PA

Important Payment Information and Permission Slips Information

<table>
<thead>
<tr>
<th>Permission Forms</th>
<th>due October 15th.</th>
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<tbody>
<tr>
<td>Payment due date</td>
<td>no later than November 1st.</td>
</tr>
<tr>
<td>Price</td>
<td>$ 47.00</td>
</tr>
<tr>
<td>Checks Payable to</td>
<td>Twin Valley Middle School</td>
</tr>
<tr>
<td>Cash accepted</td>
<td></td>
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“Little Red Robin Hood: A Musical Panto
One humdinger of a story!
Fairytales collide in a brand new holiday panto — Robin Hood is dead, his merry men are in hiding, and Nottinghamshire is taken over by a greedy villainess. (Gasp!) Can a new hero, or heroine, emerge from Sherwood Forest and save the day? Set in the 1940s with a dash of the medieval, this hilarious, musical mashup is a most inventive panto!
Student Name: ___________________________ Grade: 6

TVSD Employee Responsible for Trip: Kaitlin Gingrich and Barb Lussier

Destination: People's Light and Buca di Beppo

Date of Trip: 12/6/19 Departure Time: 9:00 Return Time: 3:00

Permission: I give permission for (Student's Name) to participate in this trip. In the event that my child fails to follow all the school rules and regulations during the trip, I understand that he/she will be subject to appropriate disciplinary action. In the event of a medical emergency involving my child, and in case a parent/guardian cannot be reached, I give consent to the school personnel in charge during the trip to secure appropriate medical treatment.

Medical Concerns: Does your student have any medical concerns that require the attention of the school nurse and/or the trip chaperone(s)? ☐ YES* ☐ NO

*The TVSD employee responsible for the trip will coordinate with the school nurse.

Parent/guardian contact number during time of trip: Work # ___________________________

Mobile # ___________________________ Home # ___________________________

Other Emergency contact information: ___________________________

Parent/Guardian name (Please Print): ___________________________

Parent/guardian signature ___________________________ Date ____________

I, a student in the Twin Valley School District, agree to follow all school rules and regulations during this trip. I understand that failure to do so will result in appropriate disciplinary action.

Student Signature ___________________________ Date ____________

If elementary student, parent must sign

Trip date: 12/6/19 Destination: People's Light and Buca di Beppo