

ELIZABETH CITY STATE UNIVERSITY

1704 Weeksville Road Elizabeth City, NC 27909

June 19, 2017

| Dear Parent/Guardian, | | | |
|---|---|--|--|
| On Tuesday, June 27, 2017 your child, | , will be attending a field trip to the | | |
| Dismal Swamp Museum as part of the PiMERS Middle School Summer Program and lunch will be provided. All students taking this field trip must have a permission slip on file prior to each trip. <i>No child will be able to take this field trip unless this form is signed and returned.</i> Please complete the form below. Thank you for your assistance! | | | |
| | | PERMISSSION SLIP | |
| | | I give do not givepermission for my child | ,, to attend the field trip. The |
| | | van will be leaving Lane Hall on the ECSU campus o | n at 9:00 am and return at approximately 3:00 pm . |
| | | Parent/Guardian's Name (Printed) | |
| *Parent Signature | Date | | |
| Phone Numbers (Home) (Work | (Cell) | | |
| Any known allergies or medical problems | | | |
| | Phone | | |

Center of Excellence in Remote Sensing Education and Research

Department of Mathematics and Computer Science Tel: (252) 335-3696 Email: djohnson@cerser.ecsu.edu Campus Box 672