



ELIZABETH CITY STATE UNIVERSITY

1704 Weeksville Road Elizabeth City, NC 27909

July 11, 2018

Dear Parent/Guardian,

On **Tuesday**, July 11, 2018 your child, _____, will be attending a field trip to the **Dismal Swamp Museum Field Trip** as part of the PiMERS Summer Program and lunch will be provided. All students taking this field trip must have a permission slip on file prior to each trip. *No child will be able to take this field trip unless this form is signed and returned.* **Please complete the form below.**

Thank you for your assistance!

PERMISSION SLIP

I give ___ **do not give** ___ permission for my child, _____, to attend the Dismal Swamp Museum field trip. The van will be leaving Dixon Hall on the ECSU campus on 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 _____

**Emergency Contact _____ Phone _____

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