

**ELIZABETH CITY STATE UNIVERSITY**

1704 Weeksville Road Elizabeth City, NC 27909

Dear Parent/Guardian,

On **Wednesday, July 18, 2018** your child, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, will be attending a field trip to the **Virginia Air & Space Center** 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 Virginia Air & Space Center field trip.The van will be leaving Dixon Hall on the ECSU campus at **8:00 am** and return at approximately **3:30 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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