

Stafford Middle School Music Department

Stafford Springs, CT 06076

On **September 29, 2015**, the middle school band students have the opportunity to take a field trip to the **Stafford Band Picnic**. Students will be dropped off by bus at Stafford High School at **2:00 pm**. The students will participate in activities and a dinner in conjunction with band students at Stafford Elementary School and Stafford High School. Students are welcome to bring their own dinner, as well. The event will conclude at **6:00 pm**. A parent/guardian must inform Mrs. O'Brien before the event if the student will be picked up by someone other than the parent/guardian. All inclusive cost for the day is \$0 .

Students are invited to wear their blue Stafford Band t-shirts to the event.

Please complete the permission slip below and return it NO LATER THAN September 22, 2015.

(Please Cut Here and Return Bottom Portion)

I, _____, having received my parents' permission to participate in the above activity, do hereby agree to abide by the Board of Education and Stafford Middle School policies regarding my behavior.

Student Signature

Date _____

PERMISSION FORM

I give permission for my son/daughter _____ to go on a field trip to the **Stafford Band Picnic** on **September 29, 2015**. The students will be dropped off by bus at **2:00 pm** and must be picked up no later than **6:00 pm**. I understand that failure to provide home address and emergency telephone numbers will result in my child not being able to attend the trip.

Parent Signature _____

Telephone# _____

Address _____

Emergency Contact _____

Telephone# _____

Method of Transportation: Bus Drop-Off/Parent Pick-Up