



**ELIZABETH CITY STATE UNIVERSITY**

1704 Weeksville Road Elizabeth City, NC 27909

June 16, 2014

Dear Parent/Guardian,

On **Wednesday, June 25, 2014** your child, \_\_\_\_\_, will be attending a field trip to **the Great Dismal Swamp Camp on Route 17 in Camden County, NC**. The van will be leaving Lane Hall on the ECSU campus on at **8:15 am** and return at approximately **1:00 pm**. This field trip is a part of the CReSIS 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. *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 field trip to **the Great Dismal Swamp Camp on Route 17 in Camden County, NC** on **Wednesday, June 25, 2014**.

Parent/Guardian's Name (Printed) \_\_\_\_\_

\*Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Phone Numbers (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Any known allergies or medical problems \_\_\_\_\_

\_\_\_\_\_  
\*\*Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

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