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**CHARLOTTE-MECKLENBURG SCHOOLS**

**CLASS TRIP STUDENT PERMISSION FORM**

 **Date: January 4th, 2017**

Dear Parents:

A class trip has been approved to: New York City on April 20th-23rd, 2017.

The signature of a parent/guardian is required in order to allow your child to participate in this off-campus trip. Please sign the bottom portion of this form and return it to the teacher.

 Sincerely,

 Lindsay Kelvington and Laura Hoffman

**Mode of travel:** [ ] School/Activity Bus [ ] Car(s) [x] Other **Air Travel**

**Cost of trip**: ~ $1,349 students and chaperones. **Partial payment is due by January 17th and the remaining portions are due by February 14th, and March 14th.**

**Meal Information: Breakfasts, lunches, and dinners will be included in the form of meal allowances each day. Dinner at the airport on the final day will be the responsibility of the student.**

**Information about the field trip:**

The purpose of the trip is to travel to New York City to seek out behind the scenes knowledge of the fashion/design and technical theatre industry. The cost of the trip is ~$1,349 based on 16 students attending and a 4-person occupancy per room. The cost includes flight, hotel, meals, transportation, workshops we will attend, as well as two shows. Payments will be made through NWSA TAG via check beginning January 17th for the first deposit, two additional payments will be made one on February 14th and one on March 14th. We will make fundraising efforts and take that out of our final payment. On April 20th, the students and chaperones will meet at Charlotte Douglas Int’l airport time TBD in order to travel to NYC. Upon arrival, we will take a shuttle to Faifield Inn and Suites-21 W. 37th Street, where we will be staying. We will be traveling by subway and foot to our locations each day. On April 23rd, we will be departing the airport to return to Charlotte times and airport location TBD.

I have read the field trip description.

I give permission I do not give permission

for to go on this trip sponsored by the

 *Student’s full name*

Charlotte-Mecklenburg schools.

**Check** enclosed. Please make checks out to \_\_NWSA TAG\_\_.

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 *Date Parent/Guardian*

**Donation:** I would like to donate $\_\_\_\_\_\_\_\_ to help a student who is unable to pay the full cost.