



### PERMISSION FORM FOR STUDENT FIELD TRIP

Dear Parents:

The following trip has been arranged to complement the instructional program of your student. This trip has been approved according to the Board of Education Policy and guidelines established by the Superintendent of Schools. All school system policies and school rules are in effect for the duration of the trip. If you have any questions, please feel free to contact the Teacher-In-Charge.

Please complete the bottom portion of this form, **detach** and return with cash or check to the Teacher-In-Charge. If you can chaperone, please check the box at the bottom and provide your contact information.

School:	Guilford Elementary School		
Destination:	In-house Fire Safety House		
Objective of the trip:	Educating students on fire emergencies		
Class/Group:	2nd Grade		
Departure date:	11/29/17	Time:	9:30 AM
Return date:	11/29/17	Time:	3:30 PM
Bus Company:			
Public Transport:			
Cost per student:	\$0		
Checks payable to:	Guilford Elementary School		
Due Date:	11/17/17		
Meal Arrangements:	Normal lunch at GES		
Appropriate Attire:	Normal school attire (sneakers)		
Total # of Students:	66		
Anticipated Ratio of Chaperones to Students:	1:8		

This trip will be:	
Student Day <input checked="" type="checkbox"/>	Extended Day <input type="checkbox"/>
Overnight <input type="checkbox"/>	Non School Day <input type="checkbox"/>

If the trip returns after the regular student day, the parent will pick up the student at the school within 15 minutes of return.

Alternate plans in case of postponement or cancellation:

There may be a separate attachment detailing the itinerary, special clothing or cash requirements, as well as any additional rules or procedures. Please contact the Teacher-In-Charge as soon as possible if you have any special needs regarding this trip.

Teacher-In-Charge: Mrs. Maynard

Contact number: 240-476-1252

THE HOWARD COUNTY PUBLIC SCHOOL SYSTEM RESERVES THE RIGHT TO CANCEL A TRIP AT ANY TIME IN ORDER TO ENSURE THE SAFETY OF BOTH STUDENTS AND STAFF MEMBERS. IF SUCH A CANCELLATION OCCURS, THE SCHOOL SYSTEM IS NOT RESPONSIBLE FOR ANY FINANCIAL LOSS INCURRED BY THE PARENT. THE SCHOOL SYSTEM IS ALSO NOT RESPONSIBLE FOR ANY LOST OR STOLEN PERSONAL ITEMS.

I GRANT PERMISSION FOR \_\_\_\_\_ TO the Fire Safety House on 11/29/17.  
(PRINT Student Name) (Destination)

Parent Name: \_\_\_\_\_ Parent Phone #: \_\_\_\_\_

I RECOGNIZE THAT HOWARD COUNTY PUBLIC SCHOOL SYSTEM CANNOT BE HELD RESPONSIBLE FOR CONDITIONS BEYOND THEIR CONTROL.

I AM AVAILABLE TO CHAPERONE AND ACCEPT THE DUTIES AND RESPONSIBILITIES OF THE POSITION.

CHAPERONE NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

CHAPERONE PHONE NUMBER \_\_\_\_\_ CHAPERONE EMAIL: \_\_\_\_\_

IFAS #39502293 Packet Please detach and return this bottom portion with your payment to the Teacher-In-Charge



# HOWARD COUNTY DEPARTMENT OF FIRE AND RESCUE SERVICES

6751 Columbia Gateway Drive, Suite 400, Columbia, Maryland 21046  
410-313-6000

JOHN S. BUTLER, FIRE CHIEF • ALLAN H. KITTLEMAN, COUNTY EXECUTIVE

## 2017 – 2018 SAFETY HOUSE PROGRAM PERMISSION SLIP

School: \_\_\_\_\_

Teacher: \_\_\_\_\_

Date of visit: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Please Check ONLY ONE:

- My child **has** permission to tour the Safety House.
- My child **does not have** permission to tour the Safety House.

Please indicate below any special considerations the firefighters should know about your child:

\_\_\_\_\_

\_\_\_\_\_

- Please check here if you wish for your child to be removed from the Safety House prior to the fog demonstration. For questions regarding the fog demonstration, please contact:

Firefighter/Tim Sinz  
Howard County Fire & Rescue's Public Education Specialist  
410-313-6520  
fd3552@howardcountymd.gov

The information you provide will be handled in a confidential manner. Information provided on this form will be shared with staff as necessary to maintain your child's safety.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

Howard County Department of Fire and Rescue Services  
Office of the Fire Marshal  
6751 Columbia Gateway Dr.  
Columbia, MD 21046  
410-313-6040