



The Tome School
581 S. Maryland Avenue
North East, Maryland 21901

THE PERMISSION SLIP



WHO: 7th grade

WHAT: **Baltimore Medieval Times**

WHERE: Arundel Mills, Hanover, MD

WHEN: Friday, March 6, 2020

COST: \$41.00

LEAVE: 8:55 am

RETURN: 2:30 pm

DRESS: Jeans and collared shirt

*Jousting, Horsemanship &
Falconry plus a 4-course,
utensil-free meal served in
a castle-like space.*

Please complete the following form and return to Mrs. Roose by February 7.

Name of Student: _____

Grade: _____

Baltimore Medieval Times

March 6, 2020

I hereby give my permission for my student to participate in the school-sponsored trip listed above. Students are held to the same code of conduct for the duration of the trip as if they were in school.

In the event that my student should require emergency medical care at any time that he/she is under the supervision of The Tome School or any of its employees or agents, I give my full permission for emergency medical care to be administered/obtained. I understand that every reasonable attempt will be made to reach me at the telephone numbers listed below, but that no emergency care will be delayed or withheld because of an inability to promptly contact me.

Parent's Daytime Phone Number (on day of trip): _____

Parent's Cell Phone Number(s): _____

List any concerns, allergies, other pertinent health information or any medications that may be necessary:

(Medications will be administered by the classroom teachers. Appropriate forms must be completed).

MY CHILD HAS A FOOD ALLERGY to _____

Parent Signature *: _____

Date: _____

** The above signature grants permission to attend the field trip and to administer/obtain emergency medical treatment*

I am interested in chaperoning the trip. The cost per parent is \$38.00.

Please wait to send in payment for parent until your spot is confirmed.

(Parent Name) _____

CHAPERONES will need to drive or carpool to Medieval Times. Further detail will be provided closer to date of trip.