

Rescheduled Date

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

THE PERMISSION SLIP

WHO: Kindergarten Classes

WHAT: **Apple Orchard/Packing House Tour**

WHERE: **Milburn Orchards** Elkton, MD

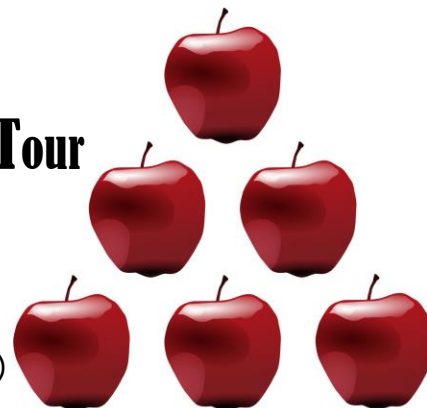
WHEN: Friday, November 2, 2018

COST: \$0.00 (we have already received your payment)

LEAVE: 8:45 a.m.

RETURN: 11:45 a.m.

DRESS: **Long pants with sneakers.** This is an outside trip. Please dress your child appropriately for the weather!



Please complete the following permission form and return with payment to the teacher by **Monday, October 29, 2018.**

_____ has my permission to travel to Milburn Orchards on Friday, November 2, 2018. The Tome School has my permission to grant consent for emergency medical treatment to be administered to my child. Our family insurance:

company is _____

policy number _____ under the name _____

I agree to indemnify and hold harmless, The Tome School and its employees from any losses, damages or injuries which my son/daughter may sustain arising out of this event.

Parent Signature

Date

Phone number where parent may be reached: _____

Please check here if your child has a medication at school which needs to be brought on school trip.

Medication name: _____