I give my child(ren) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

permission to attend field trips with the Warren Woods S.A.C.C. program.

During the school year, I understand that there is a $15.00 additional fee added to the normal hours attended for that particular day.

I will have my child at the program at least 30 minutes before each trip. If I do not get my child to the school on time, I will take responsibility for his/her care that day. I also understand that the schedule of events is subject to change.

Parent/Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_