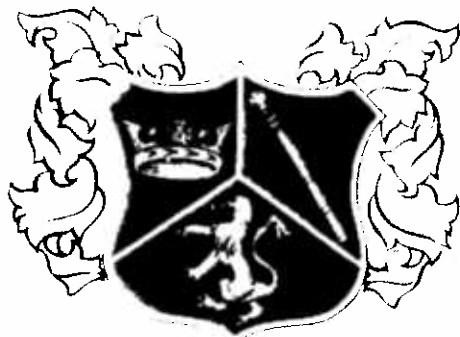


From The Office
Of The Principa



MENCHVILLE HIGH SCHOOL

275 MENCHVILLE ROAD
NEWPORT NEWS, VIRGINIA 23602-6895

Field Trip Permission Form

Dear Parent:

The Menchville Robotics Team
(name of organization) _____ of Menchville

High School is planning a trip for its members to FIRST Washington DC Regional
(location) _____ on

March 3-6, 2010

(date(s) of trip)

The cost to each student is \$80.00

(dollar amount)

They will travel by bus, and every precaution will be taken by Mr. Matt Lythgoe
(faculty member name)

the faculty member(s) in charge. We are unable to assume responsibility for emergencies in the way of an accident or delay en route beyond the control of those in charge. If you desire for your student to make the trip, please indicate your consent to the conditions outlined above and on the back of this letter by signing and returning this letter to school.

Sincerely,

Mr. James R. Surry
Principal

You are representing the community of Menchville High School and the entire student body while on this field trip. Each student must abide by the following:

1. Students will be under the supervision of an adult sponsor / teacher at all times.
2. The decisions of the chaperone(s) will be final.
3. General conduct and appearance will be appropriate to places that are visited.
4. Each person will participate in all activities scheduled for the group.
5. While on this field trip, students, parents, and adult sponsors are reminded that anyone of the offenses listed below will result in some form of discipline action and/or suspension from school:
 - a. fighting
 - b. gambling
 - c. smoking
 - d. theft
 - e. use of drugs, narcotics, and alcoholic beverages
 - f. other offensive behaviors

OUR GOAL

_____ is scheduled to attend a field
(student's full name)
trip with Menchville Robotics Team to FIRST Washington DC Regional
(name of organization) (location)
on March 3-6, 2010
(date(s))

Departure Date and Time: March 3, 11:00am

Departure Location: MHS Robotics Shop

Return Date and Time: March 6, 2010, 11:00pm

Return Location: MHS Robotics Shop

Parents / Guardians, please ensure that arrangements are made for the timely drop-off and pick-up of your student.

Teacher Signatures (required):

1st Period _____

3rd Period _____

5th Period _____

7th Period _____

_____ Purple Day _____ Gold Day

2nd Period _____

4th Period _____

5th Period _____

6th Period _____

Parental Permission (required)

_____ has my permission to attend this field trip. I
(student's full name)

understand that the cost will be \$80.00 per student, and that they will be traveling by
(dollar amount)

bus. I grant authority to Matt Lythgoe and Matt Wilbur the teacher(s) in charge
(faculty member name)

to act in my absence should my son/daughter require immediate medical attention while on this field trip.
Beyond this, I will not hold the school or those supervising responsible.

(Parent / Guardian Signature)

(Date of Signature)

(Print Parent / Guardian Name)

(Home Phone Number)

(Cell Phone Number)

(Other Emergency Phone Number / Name)