

IMMACULATE CONCEPTION SCHOOL

PERMISSION FOR SPECIAL ACTIVITIES

DESCRIPTION OF ACTIVITY:

Tour of City Water Facilities and Exploration	Place. This will be a non-uniform day, but please wear your
Kodiak t-shirt. Also pack a towel, water bottle a	and lunch. Please be sure to dress for all weather conditions.
DATE: Thursday, June 6, 2019	
DEPARTURE TIME:	9 am
APPROX. ARRIVAL TIME BACK AT SCHOOL:	2:15 pm
METHOD OF TRANSPORTATION:	Bus
COST: (if any)	5.00
TEACHER'S SIGNATURE:	
ADMINISTRATION APPROVAL:	
PLEASE RETAIN THIS SECTION AS YOUR INFORMATION ON THIS ACTIVITY.	
PLEASE SIGN AND RETURN BY Thursday, May 30	
	the school by Thursday, June 30, if you would like your written permission from the parents/guardians, the child
I give permission for my child,	, in Grade2
at Immaculate Conception School to participate	e in <u>City Water/Exploration Pl Field Trip</u>
onThursday, June 6, 2019	<u>·</u>
Yes, I can help with supervision on this a	ctivity and have a current Criminal Record Check on file.
Signature of Parent/Guardian	Date Signed