



WASHINGTON, D.C. TRIP

TRAVELER INTENT FORM

March 10, 2020

Dear Parents,

Please fill in the form below concerning attendance on the Washington, D.C. trip. We need to know your decision so we can plan accordingly. Consider this information:

- This trip is highly educational.
- At no time will your fifth grader be alone without a responsible adult (excluding restroom breaks).
- There will be at least one adult in every hotel room in the evenings.
- There are seven teachers going to help supervise and ensure that all children are safe.
- We will have a tour guide from the company to help us navigate for every group.

For students who have serious medical issues, we strongly encourage a parent to attend as a chaperone. Of course, the decision is yours. It is our hope that all of the students will be able to make the trip with us, but there will be a teacher to work with the students whose parents opt them out of the trip.

The Fifth Grade Team

TRIP INTENT FORM _____ (Student's Name Printed) _____ (HR)

_____ After some consideration, I have decided that my child **will** go on the trip to Washington, D.C. October 7-9 with the other fifth graders.

_____ I plan to go on the trip as a chaperone. _____ (name and relationship to student printed)

_____ Another adult plans on chaperoning. _____ (name & relationship to student printed)

_____ After some consideration, I have decided that my child **will not** be going on the Washington D. C. trip. I understand that my child is expected to attend school and will have a substitute teacher for the days the other students/teachers are gone.

_____ Date _____ (Signature)

Please sign and return this slip by Thursday, March 19, 2020