



SUFFIELD MIDDLE SCHOOL

350 MOUNTAIN ROAD
SUFFIELD, CONNECTICUT 06078
Phone (860) 668-3820
Fax (860) 668-3088

DAMON PEARCE, Principal

ASHLEY EICHORN Assistant Principal

FIELD TRIP PERMISSION FORM

The 7th and 8th Grade Bands from Suffield Middle School are attending Fantastic Festivals on Friday, May 11, 2018 at Arace Middle School in Bloomfield, CT. At the festival students will perform for judges, receive feedback and a rating, and listen to other groups. As a reward for the students' hard work and participation in the festival, students will spend the afternoon at Six Flags New England in Agawam, MA celebrating their musical achievements.

The Cost of the trip is \$32.00 for students who hold a Six Flags season pass and \$53.00 for students who do not hold a season pass. Students should wear comfortable shorts and shoes and must wear their SMS Band t-shirt for the festival.

Students will depart SMS at 7:45, and performances will begin at Arace MS at 8:45. We will return back to SMS at 4:30 in the afternoon. **Parents are responsible for arranging transportation home from SMS at 4:30 p.m. on May 11.**

Please return the bottom half of this form and cash or check payment made out to Suffield Middle School by February 23, 2018. Please do not hesitate to contact me if you have any questions or concerns.

Thank You,

Corey Killian
ckillian@suffield.org
7-8 Band Director

✂-----

Please sign and return with payment to: Mr. Killian by Friday, February 23rd in order to attend the field trip to Fantastic Festivals at Six Flags New England.

I give my child, *(please print)* _____, permission to attend Fantastic Festivals at Six Flags New England.

Payment: Please enclose cash or a check made out to Suffield Middle School. Please check one:

_____ My child holds, or will hold by May 11, a Six Flags New England 2018 Season Pass. I have enclosed \$32.00.

_____ My child does not hold, and will not hold, a Six Flags New England 2018 Season Pass. I have enclosed \$53.00.

Medical concerns: YES _____ NO _____ If yes, please list concerns here: _____

Parent Signature: _____ Parent Phone: _____