PLEASE RETURN THIS FORM BY JANUARY 17, 2020

2019-2020 OUTDOOR EDUCATION PROGRAM
PARENT/GUARDIAN PERMISSION FORM
TEAM 6A

My child_____________________________________ has my permission to
attend the Outdoor Education Program at Mohican Outdoor School during the
days of Monday, May 11th through Wednesday, May 13th. The total cost of
$255.00 will be assumed by me.

__________________________________         ________
Parent/Guardian Signature           Date

*If you have concerns about sending your child to camp, please contact
Miss Ivons, Mrs. Ours or Miss Griffin before making your final decision.

My child_____________________________________ WILL NOT be attending
the Outdoor Education Program at Mohican Outdoor School during the days of
Monday, May 11th through Wednesday, May 13th. I understand that my child
will be expected to attend school during these days or he/she will be marked
as an unexcused absence.

If your child IS NOT attending camp, please return this signed form.

___________________________________       ________
Parent/Guardian Signature Date

*If financial assistance is needed, please email Mrs. Mineard by February 21st for a
Scholarship Application at cariannmineard@solonboe.org.