PLEASE RETURN THIS FORM BY JANUARY 17, 2020

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

My child_____________________________________ has my permission to attend the Outdoor Education Program at Mohican Outdoor School during the days of Wednesday, May 13th through Friday, May 15th. 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 Wednesday, May 13th through Friday, May 15th. 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.