Dear 7th Grade Parents/Guardians,

It is hard to believe we are quickly approaching the end of the year. Science classes are studying animals, their habitats, and their roles in various ecosystems. To supplement these last two units, students will have the opportunity to attend a field trip to the Brookfield Zoo.

The date of the field trip is Thursday, May 24th. We will leave Aux Sable at 8:45 a.m. and plan on returning around 1:30 pm. We will attend rain or shine, so please have your child dress appropriately. Students may bring a draw-string bag to carry belongings. Students are expected to stay with their chaperone group at all times.

The cost of the trip is **\$5.00**. This field trip is an educational piece of the curriculum; therefore, we would like every student to attend. Please fill out the attached trip consent form and have your child return this form along with the \$5.00 fee to their **Math** teacher by **Thursday, April 26**th. Checks can be made payable to "Aux Sable Middle School" with 7th grade field trip written on the memo line of the check, or cash may be sent in exact change please.

Your child will need a lunch to eat at the zoo. You may pack a sack lunch, send money to purchase lunch at the zoo, or order lunch from our food service, Aramark. Please see the Aramark order form on the back of this letter. *Note, if you are interested in ordering, this form with the lunch cost, must be sent in by April 26th.

Thank you for your continued support.

Respectfully,

7th Grade Teachers Aux Sable Middle School 815-439-7092



CALLLING ALL CHAPERONES!!!

We are in need of volunteers to chaperone this trip. The cost for chaperones is FREE! If you are interested, please fill out the information below and your child should return this to their **Math** teacher. We will contact you to confirm your attendance as the date approaches.

Student Name:	
Chaperone Name:	
Phone # to reach y	ou:

Aux Sable Middle School

Brookfield Zoo – Thursday, May 24, 2018

Prepared by: ARAMARK

Lunch Choice - Cost \$2.60/each

Please check your choices
SunButter & Jelly on whole grain bread
Turkey & Cheese on whole grain bread with lettuce & mayonnaise
Ham & Cheese on whole grain bread with lettuce & mayonnaise
All the above lunches will include carrot sticks, snack mix & 100% juice slush
Add a reduced fat/whole grain cookie for \$.50
Total Lunch Amount:
Payment preference (Please check one)
Use student's meal account
Check
Cash
If your student is eligible for free lunch, these meals are free. If your student is eligible for reduced lunch, this lunch is \$.40

PLAINFIELD COMMUNITY CONSOLIDATED SCHOOLS TRIP CONSENT FORM

hereb	y give permission ar	nd consent for my son/o	daughter,	student's name)			
to part	icipate in the	(activity)					
on		(activity) sponsored by Plainfield	Community Co	onsolidated School Dist	rict 202		
	(date)						
and to	be transported by:	(X) School Bus	() van	() Private venicie			
1.	CONDUCT: I unde Student Handbook	rstand that my student and other rules of cond activity. I have discusse	must comply w duct establishe	rith the provisions of th d by the School District			
2.		CAL AID: I hereby give mergency medical trea () No	•		ction with the activity.		
	If I am away from	home during the time (of this activity,	I can be reached at:			
		(address)		(telephone)			
	Other health inform	mation about my child o	of importance t	o the activity:			
3.	INDEMNITY /INSURANCE: I agree to indemnify and hold harmless the Plainfield School District Board of Education and its employees and volunteers against any claim for damages or loss including reasonable attorney fees which arise out of the above-mentioned activity. I also understand that if transportation is provided by private vehicle, primary liability and insurance coverage resides with the driver and/or owner of the vehicle.						
Sign	ed:						
	Parent or	Guardian Signature	D	ate			
	Address		Telepho	one			