

The Chicago Experience 2017



Students will travel to Chicago on coach buses and experience a full day of exciting activities.

The tentative agenda is as follows:

Depart Nippersink at 6:30 A.M.

10:00 - A 1 ½ hour Lake Michigan cruise on the **Tall Ship Windy**.

11:30 -12:00 - **Jimmy John's** lunch at Millennium Park

12:30 - 4:00 - **Museum of Science and Industry**/ included is the Imax Experience and a train ride through a coal mine

5:00 - Dinner at **Hard Rock Cafe**

8:00 - **Blue Man Group** Performance

10:00 - Depart for home

11:00- 11:30 Arrive back at NMS

January 18, 2017

Dear Parent/Guardian:

As we are now in the second half of the school year, I wanted to send home information regarding the 8th Grade Field Trip.

- Students should arrive at school by 6:00 A.M. Thursday, May 18th. (Make sure your student checks in at one of the tables in the gym.) It is important that students arrive on time as we need to stay on schedule.
- Buses leave the school at 6:30 A.M.
- We will arrive back at school between 11:00 - 11:30 p.m. The students will call home from the bus when we are a half hour from school. Please make sure you are at school when buses arrive.
- Students' cell phones are allowed on the trip. Any inappropriate use of the cell phone will result in the loss of phone privileges.
- Students are responsible for any electronic devices they bring.
- All drinks should be in a resealable bottle.
- Students should bring one carry-on bag for items such as snacks, games and additional clothing.
- School dress code is in effect for the trip. Students are required to wear their Eighth Grade Class T-shirt on the trip. A Nippersink Middle School shirt will be provided to students who do not have the required shirt with them. Refusal to wear the provided shirt will result in a loss of activities until the student complies.
- We will spend an hour and a half on Lake Michigan in the morning and the ship sails rain or shine. We would advise students to take a layered approach with their clothing as it can be windy and cold even if it is sunny.
- Any medication must be labeled, have instruction for administering and be in a Ziploc bag labeled with the student's name. Medication must be given to a chaperone from your student's bus when checking in on Thursday morning.

Important Dates to Remember

- February 16, 2017 - Deposit of \$75 is due
- April 13, 2017 - Final payment of \$75 is due
- May 18, 2017 - Date of trip

Attached to this letter is the permission form for the trip. Please make sure you turn in the completed form and the \$75 deposit by February 16, 2017.

Any money paid prior to April 13th will be refunded if a student decides not to go or if he/she is removed from the trip per the Eighth Grade Contract. However, after April 13th no money will be refunded as final payment for the trip is due and all tickets purchased are non-refundable. If you have any questions or concerns please contact Patrick Evans at pevans@nsd2.com or (815) 678-6830.

Return

Registration and Emergency Release for Treatment

I/We, the parent(s)/Guardian of :

(child's name) _____, have temporarily given the guardianship of said child to the chaperones listed below during the school trip to Chicago on May 18, 2017. The named guardians have full authority to sign and approve any emergency medical care or distribution of medication that the above mentioned child may require during my/our absence.

Chaperones: Mrs. Richards and 8th Grade teachers

Please list below any allergies, medication, illness, or surgery that could be important in the event that emergency treatment would be needed. Also, if your child is on any medication presently, please list what kind it is and the dosage. Write on the back if needed.

I also understand that if my child does not follow the school rules on this trip, that I will be called to transport my child home from Chicago. I also understand that his academic and behavior standings could hinder my child from attending the Chicago trip.

Medical insurance name and number:

Please sign this form and include phone numbers where you can be reached day and/or night should notification be necessary because of serious illness and/or a behavior problem.

Parent/Guardian Signature	Day Phone #	Evening Phone #	Work #	Cell Phone #

Student's Name: _____

Home Address: _____

Date of Birth: _____

Medical/Medication:

Allergies _____

Parent Signature: _____

Want to use Butter Braid Money \$ _____

Encore Teacher: _____

Paid	Cash	Check #
Paid	Cash	Check #
Paid	Cash	Check #