

SUMMER 2019 – FIELD TRIP PERMISSION FORM and ADDITIONAL PROGRAMMING COSTS

☆☆ PLEASE RETURN BY MONDAY, JUNE 17, 2019 ☆☆

SUBMIT COSTS (CHEQUE OR CASH) WITH PERMISSION FORM
(DO NOT INCLUDE WITH CHILDCARE FEE PAYMENT)

Dear Parents,

The children will be participating in summer trips and excursions. We will be traveling by school bus or TTC – check the monthly calendars for details. The other outings are close enough to the Day Care that the children can safely walk to the individual locations.

****Please make a note of all the departure times found in the Monthly Calendars, as we will not wait for any children arriving late****

TRIP, EXCURSION or ACTIVITY	TRAVELLING BY:	DATE	GROUP	COST per CHILD	WILL ATTEND	WILL NOT ATTEND	PARENT INITIAL
BEACH BLAST 15 Leswyn Road	School Bus	Friday, July 19	All Groups	\$15.00			
MEDIEVAL TIMES 10 Dufferin St. Exhibition Place	TTC	Thursday, July 25	JK/SK & SA	\$20.00			
LEGO LAND 1 Bass Pro Mills, Vaughan Mills	School Bus	Friday, August 16	Pre-S & JK/SK	\$15.00			
HIGH PARK 1873 Bloor St. W.	TTC	Friday, August 16	School-Age	No charge			
WALTER SAUNDERS PARK Hopewell Ave.	TTC	Friday, August 23	School-Age	No charge			
All Community Excursions: Dufferin/St. Clair Library, Loretto College Wading Pool, No Frills (St. Clair/Winona), Palermo Bakery, McDonalds, Bee Store, Glenholme Park, Earlscur Park/ JJP Pool	Walking	Throughout the summer.	All Groups	No charge			

My child, _____, has my permission to accompany Harmony Childcare Centre on the trips and excursions that are marked "Will Attend" above. He / she will not be participating in the trips and excursions marked "Will Not Attend".

When checking, "Will Attend" please mark with a ✓ or an ✕ and sign your initials beside it. All parents of children participating in the summer program need to consent to the community outings and initial beside it or we will assume that he / she will not be participating in those outings. If you have any questions or concerns regarding the trips, excursions and/or outings please contact Susie.

EMERGENCY CONTACT (print name): _____ Relationship: _____

EMERGENCY NUMBER: _____

PARENT/ NAME & SIGNATURE: _____ DATE: _____
GUARDIAN PRINT NAME AND THEN SIGN

PAID IN FULL: \$ _____

CASH CHEQUE STAFF NAME: _____