C:\Documents and Settings\melissa.vollono\Local Settings\Temporary Internet Files\Content.IE5\6N0J018R\MC900287131[1].wmf

Dear Student and Parent/Guardian, November 17, 2014

We are pleased and excited to inform you that your registration is complete and you have been accepted into “CAPTivating Kids I”. Congratulations and Welcome!

Our first adventure will be this Friday afternoon/evening, November 21st, 2014. It will take place at Seymour Middle School in Seymour, CT. We will be boarding bus promptly at 2:45 PM and will be returning to WMS at approximately 8:15 PM.  **Please make sure your parent/guardian will be at Washington Middle School to pick you up at 8:15 PM!**

At our initial get-together we will learn more about each other by participating in fun, interactive activities. We will also hear more about what CAPTivating Kids will be offering over the coming months. The afternoon/evening will conclude with pizza and DJ music.

Please remember that we must have a firm commitment to attend all sessions of this program in order to follow grant requirements. **Attendance will be strictly monitored and** **students with two absences will be dropped from the program**. If there are any emergencies while on the field trip, please call Mrs. Vollono @ 203-464-1201.

**Please return this permission form to Mrs. Vollono in 8D by Wednesday, November 19.**

**Or *PARENTS* may complete the RSVP form at www.CAPTivatingKidsI-WMS.weebly.com**

I give my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, permission to attend the CAPTivating Kids I field trip on November 21, 2014 to Seymour Middle School. I understand that my child will leave directly from school at approximately 2:45 PM and will return to Washington Middle School at approximately 8:15 PM.

\_\_\_\_\_ My child will be walking home

**OR**

\_\_\_\_\_ My child will be picked up promptly at 8:15 PM by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Their phone number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_