

WINDY GAP PERMISSION FORM
Shannon Forest Christian School

Dear Parents,

All students in Grades 7 – 12 are going on a Spiritual Emphasis Retreat to Windy Gap, a camp in Weaverville, NC on Wednesday, October 6, through Friday, October 8, 2010.

This is a highlight of the year for all our Upper School students.

All trips are taken in chartered buses, school vans or private cars driven by parents, all of which are covered by insurance. The cost of the trip will be *\$175 per student*. The group will be accompanied by teachers and adult chaperones. Please sign and return the lower portion of this letter if your child has permission to take this trip.

Departure time: 8:30 a.m. – Wednesday, October 6

Return time: 1:00 p.m. – Friday, October 8

Sincerely,
Amber Thompson
Windy Gap Coordinator

Detach here. If payment has not been made at registration, please include \$175 with this portion. Checks should be made payable to SFCS – Windy Gap Retreat.

Permission Slip

_____ has permission to take the above mentioned field trip to Windy Gap on Wednesday, October 6 – Friday, October 8. In signing, I agree not to bring claim against the school or those in supervision on the trip in the event an injury or accident should occur. I understand that plans have been made to offer a safe and well-supervised field trip.

Parent/Guardian Signature

_____ I am interested in working at Windy Gap to help make this trip a wonderful experience for all students. Please contact me via phone or email.

Email: _____ Phone: _____