

**What:** FIELD TRIP TO THE MILWAUKEE COUNTY ZOO  
**When:** TUESDAY, JUNE 1<sup>ST</sup>  
**Time:** WE WILL LEAVE SCHOOL BY 9a.m./WE WILL RETURN BY 3p.m.  
**Who:** Kindergarten - 2<sup>nd</sup> Grade and chaperones (please observe sibling rule)  
**Lunch:** We will bring totally disposable lunches with beverages (make sure they are labeled) and eat our lunch at the Zoo.  
**Field Trip Cost:** Admission to zoo\* - **\$9.75 for students and adult chaperones**  
*\*This includes \$2 cost for admission to the Sea Lion Show*  
**Transportation:** Private passenger automobiles

**PLEASE COMPLETE AND RETURN THE BOTTOM PORTION OF THIS FORM BY  
 WEDNESDAY, MAY 26<sup>TH</sup> . THANK YOU.**

 	St. Peter's Lutheran School 145 South Sixth Street Waterford, WI 53185 (262)534-6066 <a href="http://www.stpeterswaterford.com">www.stpeterswaterford.com</a> <b>Parent/Guardian Milwaukee County Zoo Consent Form</b>
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The undersigned hereby requests and gives permission for \_\_\_\_\_ to go to the **Milwaukee County Zoo**. We will travel by private passenger automobile. This signed agreement absolves St. Peter's Lutheran School (including volunteers, and hired service personnel and any and all members of its governing boards) of any responsibility beyond such matters as may be considered reasonable care by a staff member's clear instructions for the safety, welfare, and supervision of your child. It is the parents/guardians understanding that they must assume personally and exclusively all responsibility and liability for accidents, injury, etc., which may occur to the above named child during the time of the specific activity as set forth at the beginning of this paragraph.

**Date of Field Trip: TUESDAY, JUNE 1, 2010**  
**Time of Departure & Return : by 9a.m. and return by 3p.m.**  
**Cost: \$9.75 for students and adult chaperones**

\_\_\_\_\_ I will be drive for this trip and serve as a chaperone. I can accommodate \_\_\_\_\_ students (do not include your child in the count of available seats) & \_\_\_\_\_ adults in my vehicle.

Name of parent chaperone \_\_\_\_\_

Driver form on file in school office

\$ \_\_\_\_\_ enclosed

Parent/Guardian

Signature: \_\_\_\_\_

The telephone number I can be reached at during this time: \_\_\_\_\_