## 8<sup>th</sup> Grade Washington D.C.Trip 2020: Registration and Payment

Please return this form, along with corresponding payment, NYC DOE Parent Notification/Consent Form, and Emergency/Medical Needs Form <u>by December 9, 2019</u>, to your Science teacher. Checks should be made payable to MS 447.

Child's name	: Information e		Class	
Parent/Guar	dian's name			
Parent/Guar	dian's phone number(s)			
Parent/Guar	dian's email			
	: Registration. Please che payment checks.	eck one of the follow	ing. <i>Include studen</i>	t's name and
	Unfortunately, my child v You may give a reason it			
	My child will attend the to payment of <b>\$414.00</b> for r			
	I am enclosing the <u>first</u> p plan below.	payment of \$100 for my	/ child and will particip	pate in the payment
2 <sup>nd</sup> payment du 3 <sup>rd</sup> due Monda	nd registration paperwork due b ue Monday, January 6th: \$100 y, February 3rd: \$100 yment due Monday, March 2nd		to your Science Teacher:	\$100
PART THRE	EE: Are you interested in l	being a chaperone o	n this trip? Yes	No
Name:		Relations	ship:	
A staff me	mber will reach out to y	ou regarding availa	ability and chapero	one payment.
PART FOUR	R: Financial assistance/so	cholarship:		
scholarsh contribute	I am enclosing a partial partial partial partial partial partial assistance committed to ensuring that no hips are available. We ask that a to the cost. This will allow use, please contact our guidance.	ce. student stays back from t each family requesting a to help more students at	this trip because of fina a scholarship sell boxes ttend the trip. If you will	ncial need. Partial s of candy to need financial
PART FIVE:	: Please help with a donat	tion:		
	I am enclosing an addition		to help defrag	y the costs for