

7th Grade PEEC Trip 2020: Registration and Payment

Please return this form, along with payment, NYC DOE Parent Notification/Consent Form, and Emergency/Medical Needs Form by December 11th, 2019, to your Math teacher.
Checks should be made payable to MS 447.

PART ONE: Information

Child's name _____ Class _____

Parent/Guardian's name _____

Parent/Guardian's phone number(s) _____

Parent/Guardian's email _____

PART TWO: Registration Please check one of the following.

_____ My child will NOT attend the PEEC trip, but will attend school on those days (absence from the grade trip and/or school will count as unexcused absences). Please state the reason:

_____ My child WILL attend the PEEC trip, and I am enclosing the full payment of \$135

_____ My child WILL attend the PEEC trip, and I am enclosing the first payment of \$33 and will participate in the payment plan below.

1st payment and registration paperwork due: Wednesday, December 11: \$33

2nd payment due: Wednesday, Jan. 15, 2020: \$33

3rd payment due: Wednesday, Feb. 12, 2020: \$33

4th and final payment due: Wednesday, March 11, 2020: \$36

**Please include student's name and class on all checks!!*

PART THREE: Would you like to be a chaperone on this trip?

_____ I would like to chaperone. Included is my additional deposit for \$33, and I will pay the balance when the school confirms that I am needed on the trip. (In case we have more volunteers than we can accommodate.)

Name: _____ Relationship: _____

PART FOUR: Does your family need financial assistance in order for your child to participate in the trip?

_____ I am enclosing a partial payment of \$ _____ and would like to receive some financial assistance.

We are committed to ensuring that no student stays back from this trip due to financial need. Partial scholarships are available. One way to offset the cost of the trip is to sell boxes of candy to contribute to the cost. If a student sells 5 boxes, the cost of the trip is entirely covered. Additionally, if you anticipate needing financial assistance, please contact Ms. Vissa at cvissa@ms447.org or Ms. Billups, our guidance counselor, at sbillups@ms447.org, or call 718-330-9328.

PART FIVE: Please help with a donation:

_____ I am enclosing an additional donation of \$ _____ to help defray the costs for another student.
(THANK YOU!!!)