

Valley View Middle School  
6750 Valley View Road  
Edina, Minnesota  
952-848-3500 / 952-848-3501 fax

A field trip is being planned to **Camp Eden Wood – Eden Prairie, MN** for all students on the sixth grade team. Students will leave Valley View Middle School at **7:45 a.m.** and return at **2:30 p.m.** There is a cost of **\$33.00** (scholarships available – see below).

September 21 <sup>st</sup>	DREAM Team
September 22 <sup>nd</sup>	EXTREME Team
September 23 <sup>rd</sup>	FANTASTIC Four

- \*\* Please make checks payable to **Valley View Middle School**
- \*\* Parent volunteers needed – contact your student’s social studies teacher
- \*\* **Students will need to bring a bag lunch to eat on this day**

We understand the arrangements described above and believe that the necessary precautions and plans for the care and supervision of the students during the trip will be taken. Beyond this we will not hold the school or those supervising the trip responsible.

Yes, I give my permission for \_\_\_\_\_ to go on the field trip.

\_\_\_ I have attached a check for the full amount.

\_\_\_ My child will need a partial scholarship in the amount of \_\_\_\_\_, or

\_\_\_ My child needs a full scholarship for this field trip.

For Scholarships, contact: **Jada Rodby** at 848-3418 or [jadrody@edina.k12.mn.us](mailto:jadroby@edina.k12.mn.us)

No, \_\_\_\_\_ will not be participating in the field trip but I understand that she/he is expected to be at school that day and to participate in an alternate assignment/activity.

\_\_\_\_\_ (parent signature)

I would like to volunteer on this field trip. Please contact \_\_\_\_\_  
at \_\_\_\_\_ (phone) \_\_\_\_\_ (e-mail)

#### Special Instructions

Please indicate if any of the following conditions pertains to your child and if any precautions are needed while on the field trip.

My Child: (please indicate Yes or No)

- \* Has an asthmatic condition \_\_\_\_\_ medication required \_\_\_\_\_
- \* Is diabetic \_\_\_\_\_ snack required and provided \_\_\_\_\_
- \* Has allergic reactions \_\_\_\_\_ describe \_\_\_\_\_
- \* Is taking scheduled medications during the field trip \_\_\_\_\_ time \_\_\_\_\_
- \* (Medications are to be carried by the instructor in charge)