

Collegiate Academy Field Trip Authorization

WHO: Collegiate Academy students (all grades)

WHAT: A visit to Chicago to see the musical *HAMILTON*, free time for shopping, sightseeing, and eating at the Navy Pier.

WHEN: Saturday October 26th (Depart from Collegiate at 4:00am on Saturday and depart Chicago at 9:30 pm on Saturday, October 26th to return to Collegiate approximately by 6:00 am on Sunday October 27th .)

COST: \$200.00 which includes the bus ride and Hamilton show ticket (**nonrefundable** deposit of \$100 holds your spot) Please note we are **only** accepting cash, money orders, or credit card. Please note that the cost if using a credit card is \$205.00. *Seats will be filled on a first come, first served basis. There will be **no refunds** due to having to purchase the show tickets ahead of time.

Student Name: _____ Grade: _____

Phone No: (cell) _____

Name of parent or legal guardian: _____ (cell) _____

Student Consent

I, _____, agree to abide by the Collegiate Academy guidelines. I am aware that I represent the Northwest Pennsylvania Collegiate Academy and will conduct myself accordingly.

Student Signature: _____ Date: _____

Parent/Guardian Permission

_____ has permission to travel to Chicago on October 26th. I hereby waive any claim against Collegiate Academy, its representatives, agents or chaperones for any loss, injury, or liability which may arise as a result of my child's participation in this activity.

Signature of parent/guardian: _____ Date: _____

Return Permission Slip with payment to Ms. King