

Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	6-17-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	LegaSea Aquarium/Reptarium, Grant Park, Dairy Queen	Destination of Trip	LegaSea Aquarium/Reptarium, Grant Park, Dairy Queen		
Destination Phone	(810)892-3458	Student Cost	\$22	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Bring lunch, Dairy Queen ice cream		
Departure Location	Cheyenne Elementary School	Departure Time	10:00 am		
Return Location	Cheyenne Elementary School	Return Time	2:30 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="text"/>	Address	<input type="text"/>		
Parent/Guardian(s)	<input type="text"/>	Parent/Guardian Phone	<input type="text"/>		
Secondary Contact	<input type="text"/>	Secondary Phone	<input type="text"/>		
Emergency Phone	<input type="text"/>	Date(s) of Trip	6-17-26		
Activity Name	LegaSea Aquarium/Reptarium, Grant Park, DQ	Destination of Trip	LegaSea Aquarium/Reptarium, Grant Park, Dairy Queen		
Destination Phone	(810)892-3458	Student Cost	\$22	Chaperone Cost	N/A
Food Provision	Bring lunch, Dairy Queen ice cream cone	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	10:00 am		
Return Location	Cheyenne Elementary School	Return Time	2:30 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="text"/>	Date	<input type="text"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	6-18-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb Twp		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="text"/>	Address	<input type="text"/>		
Parent/Guardian(s)	<input type="text"/>	Parent/Guardian Phone	<input type="text"/>		
Secondary Contact	<input type="text"/>	Secondary Phone	<input type="text"/>		
Emergency Phone	<input type="text"/>	Date(s) of Trip	6-18-26		
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb Twp		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	none	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="text"/>	Date	<input type="text"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	6-24-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Toy Story 5 Movie	Destination of Trip	MJR Partridge Creek		
Destination Phone	(586)791-2095	Student Cost	\$22	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Popcorn & Drink		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	12:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	6-24-26		
Activity Name	Toy Story 5 Movie	Destination of Trip	MJR Partridge Creek		
Destination Phone	(586)791-2095	Student Cost	\$22	Chaperone Cost	N/A
Food Provision	Popcorn & Drink	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	12:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-15-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Clinton Township Splash Pad/Park & lunch	Destination of Trip	40700 Romeo Plank, Clinton Twp		
Destination Phone	(586)286-9336	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Sub, drink chips cookie		
Departure Location	Cheyenne Elementary School	Departure Time	10:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="text"/>	Address	<input type="text"/>		
Parent/Guardian(s)	<input type="text"/>	Parent/Guardian Phone	<input type="text"/>		
Secondary Contact	<input type="text"/>	Secondary Phone	<input type="text"/>		
Emergency Phone	<input type="text"/>	Date(s) of Trip	7-15-26		
Activity Name	Clinton Township Splash Pad/Park	Destination of Trip	40700 Romeo Plank, Clinton Twp		
Destination Phone	(586)286-9336	Student Cost	15	Chaperone Cost	N/A
Food Provision	Sub, drink chips cookie	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	10:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="text"/>	Date	<input type="text"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-16-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-16-26		
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	none	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

[Slick City Waiver](#)

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-22-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Slick City Action Park	Destination of Trip	1820 Crooks Road, Troy		
Destination Phone	(248)816-8496	Student Cost	\$24	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	8:00 am		
Return Location	Cheyenne Elementary School	Return Time	12:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-22-26		
Activity Name	Slick City Action Park	Destination of Trip	1820 Crooks Road, Troy		
Destination Phone	(248)816-8496	Student Cost	\$24	Chaperone Cost	N/A
Food Provision	None	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	8:00 am		
Return Location	Cheyenne Elementary School	Return Time	12:00 pm		

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- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
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- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-23-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center Swimming	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-23-26		
Activity Name	Macomb Twp Aquatic Center Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	none	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
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- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-29-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	The New Rink & Bounce House	Destination of Trip	50625 Van Dyke, Shelby Twp		
Destination Phone	(586)731-5006	Student Cost	\$22	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Hot dog lunch		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-29-26		
Activity Name	The New Rink & Bounce House	Destination of Trip	50625 Van Dyke, Shelby Twp		
Destination Phone	(586)731-5006	Student Cost	\$22	Chaperone Cost	N/A
Food Provision	Hot dog lunch	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
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- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
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- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-30-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center Swimming	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-30-26		
Activity Name	Macomb Twp Aquatic Center Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	None	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
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Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-8-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Zap Zone Amusement Center	Destination of Trip	43680 VanDyke, Sterling Heights		
Destination Phone	(586)323-0030	Student Cost	24	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Bring bag lunch from home		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="text"/>	Address	<input type="text"/>		
Parent/Guardian(s)	<input type="text"/>	Parent/Guardian Phone	<input type="text"/>		
Secondary Contact	<input type="text"/>	Secondary Phone	<input type="text"/>		
Emergency Phone	<input type="text"/>	Date(s) of Trip	7-8-26		
Activity Name	Zap Zone Amusement Center	Destination of Trip	43680 VanDyke, Sterling Heights		
Destination Phone	(586)323-0030	Student Cost	24	Chaperone Cost	N/A
Food Provision	Bring bag lunch from home	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:00 pm		

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Parent Signature	<input type="text"/>	Date	<input type="text"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	7-9-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	7-9-26		
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb, MI		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	none	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

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Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	8-11-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information needed in the case of an emergency.					
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)992-2900	Student Cost	15	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	None		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="text"/>	Address	<input type="text"/>		
Parent/Guardian(s)	<input type="text"/>	Parent/Guardian Phone	<input type="text"/>		
Secondary Contact	<input type="text"/>	Secondary Phone	<input type="text"/>		
Emergency Phone	<input type="text"/>	Date(s) of Trip	8-11-26		
Activity Name	Macomb Twp Aquatic Center-Swim	Destination of Trip	20699 Macomb St, Macomb		
Destination Phone	(586)-992-2900	Student Cost	15	Chaperone Cost	N/A
Food Provision	none	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	11:30 am		
Return Location	Cheyenne Elementary School	Return Time	3:00 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="text"/>	Date	<input type="text"/>
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Parent Permission Form for a Field Trip

Student		School	Cheyenne Summer Camp		
Teacher/Sponsor	Debbie Titran	Date(s) of Trip	8-5-26		
A field trip is planned for your child as indicated below. Field trips require parent approval and information is needed in the case of an emergency.					
Activity Name	Blake's Orchard	Destination of Trip	17985 Armada Center Rd, Armada		
Destination Phone	(586)295-7948	Student Cost	\$22	Chaperone Cost	N/A
Transportation	Chippewa Valley Schools bus	Food Provision	Bring bag lunch from home Includes donut and juice		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

Please complete, sign and return the lower portion of this permission slip. Retain upper portion for your records.



Student Name	<input type="checkbox"/>	Address	<input type="checkbox"/>		
Parent/Guardian(s)	<input type="checkbox"/>	Parent/Guardian Phone	<input type="checkbox"/>		
Secondary Contact	<input type="checkbox"/>	Secondary Phone	<input type="checkbox"/>		
Emergency Phone	<input type="checkbox"/>	Date(s) of Trip	8-5-26		
Activity Name	Blake's Orchard	Destination of Trip	17985 Armada Center Rd, Armada		
Destination Phone	(586)-295-7948	Student Cost	\$22	Chaperone Cost	N/A
Food Provision	Bring bag lunch from home Includes donut and juice	Transportation	Chippewa Valley Schools bus		
Departure Location	Cheyenne Elementary School	Departure Time	9:00 am		
Return Location	Cheyenne Elementary School	Return Time	1:30 pm		

- I hereby give my child permission to participate in the above named field trip activity and do hereby relieve Chippewa Valley Schools of all responsibility beyond that of normal supervision. Student behavior in this activity is regulated by and subject to the student code of conduct.
- All students must travel according to the mode indicated above unless a special arrangement is made between the parent/ guardian and the teacher/coach/sponsor/trip leader.
- When the mode of transportation is that of a privately owned vehicle, the driver must have completed and have principal approval on the Chippewa Valley Schools Acknowledgement Form for Drivers of Private Vehicles.
- For this student to participate in this activity, parent/guardian must have given permission to participate. Also, this form must be in the possession of the teacher/coach/sponsor by a specified date and from departure to return from this activity.
- In the case of a program cancellation, there is the possibility that fees paid may not be refunded unless there is program insurance coverage.
- Any limiting physical or medical condition(s) or medications that the sponsors of this trip/activity need to accommodate should be noted here:

Parent Signature	<input type="checkbox"/>	Date	<input type="checkbox"/>
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