

RICHFIELD JOINT SCHOOL DISTRICT NO. 1

**3117 HIGHWAY 167
RICHFIELD, WISCONSIN 53076
628-1032**

Dear Parent/Guardian:

Our **8th grade** class plans to take a field trip on **November 29, 2016** to the **Wisconsin Historical Society and Madison Capitol**.

We will leave Richfield School at **8:05 a.m.** and return at approximately **5:00 p.m.**

Transportation will be provided by school bus and the cost per student will be **\$11.25**.

OBJECTIVE: Students will do research for NHD at the archives. We will travel to the State Capitol to gain information on how our state government runs..

SPECIAL NOTATIONS: Students should bring money for lunch or pack a lunch. Bring cameras or phones to document information. All students will need to be picked up at RES at 5:00.

If you will allow your child to participate in the above-described event, please complete the permission form below and return it along with the fee to **Mr. Cirillo** on or before **November 21, 2016**.

Thank you for your cooperation.

Mr. Cirillo

If financial help is necessary for your child to attend this field trip, please contact Mrs. Villalobos at 628-1032. Confidential arrangements can be made.

PERMISSION SLIP

(Detach and return to Mr. Cirillo)

I hereby grant permission for _____ to participate in the above-described activity (**Wis. Historical Society and Capitol**) sponsored by the school, on **November 29, 2016**.

Comments:

Date

Signature of Parent/Guardian

Phone number of where Parent/Guardian may be reached **during this field trip**.