Hello parents and guardians—

The Holocaust classes have the incredible learning opportunity to visit the Holocaust Memorial Center (<a href="www.holocaustcenter.org/">www.holocaustcenter.org/</a>) in Farmington Hills. We are planning a trip for Monday, November 11th. We will be travelling by school bus to and from the museum. The bus will pick us up at the school at 7:45, and we will return to the school between 5:00-5:30. I strongly recommend that your student be a part of this great experience. A Holocaust survivor is scheduled to speak with us; however, they are getting much older and sometimes are not able to attend. They do have survivors on call to come in, but they cannot guarantee it.

As we will be touring the museum from 11:00 to about 2:00, I encourage your student to bring a healthy snack to have before we reach the museum. After we leave, we will be making a late lunch stop. Please make sure your student has money for this. If this is a problem, please let me know.

The admission to the museum is \$3.00. Please turn the money in to me by Friday, November 8th, so that we can pay for all the admissions at one time at the museum. This will make it much more efficient when we enter the building. Also, we would like the students to dress with some decorum. If jeans are a must, please at least refrain from t-shirts. The museum can be a rather somber place, and we want to display an air of respect and humility.

\*If you would like to join us on this trip, that would be great—but seating is limited, so let us know as soon as possible. Adult entry into the museum is \$6.00. You will also need to have the Plainwell Schools background check on file to attend.

Please feel free to contact me with any questions!

Julie Trahan, julie.trahan@plainwellschools.org

Plainwell High School (Plainwell Community Schools) 684 Starr Rd. Plainwell, MI, 49080

## TRAVEL PERMISSION FORM

This is to certify that my son/daughter,		, has permission
to take to attend the Holocaust Class fie	ld trip. The field trip will take place at The	Holocaust
Memorial Center in Farmington Hills, an	d we will leave at 7:45 and return by 5:00p	om.
•	ughter understands that he/she must follow , as well as those of the Plainwell Commu	
PARENT/GUARDIAN SIGNATURE	DATE	

## **PARTICIPATION PERMIT**

l,	understand the importance of good behavior on my part during
the Holocaust Class field trip.	
I further understand that I will abide by the f	following requirements in order to attend.
<ul> <li>Be refused permission to participate principal or delegated representative of drugs or alcohol before departure</li> <li>Be subject to disciplinary action upo</li> </ul>	
PARENT/GUARDIAN SIGNATURE	DATE
STUDENT SIGNATURE	DATE
	Nickname Evening Phone
Mother's/Father's Name	
	any and all health care providers designated by
to pr	rovide my child,,
any necessary medical care as	a result of any injury/illness.
PARENT/GLIARDIAN SIGNATURE	 DATE