

**SADDLE BROOK COMMUNITY PROGRAMS SUMMER CAMP 2019
WALKING FIELD TRIP PERMISSION FORM-SADDLE BROOK FIRE DEPARTMENT T-6**

SAFETY TOWN STUDENTS ONLY K-1

PLEASE SIGN AND RETURN TO DOOR CLERK

Permission is given for my child _____ to accompany his/her camp and chaperones on a camp trip to the **Saddle Brook Fire Department – Engine Co. No. 1 – Cambridge Ave on Wednesday, June 26**. The purpose of this is to engage and expose the children to developmentally appropriate activities that will enhance, enrich and broaden their horizons and camp experience. This is a walking trip, and this trip is part of the “Safety Town” program.

Children will be expected to behave in a responsible manner and follow regular camp rules.

At least one CPR/AED certified Camp Coordinator will attend this trip.

At approximately 1:00, campers and chaperones will walk from Smith School (main camp site – 30 Cambridge, Ave in Saddle Brook) to Engine Company Number 1 on Cambridge Avenue and return to Smith School at approximately 2:00.

The Door Clerk will have a direct line of communication with Mariann (Safety Town Organizer and Lead Counselor on this trip) via cell phone. If you need to reach your child (emergencies ONLY), please contact the camp Door Clerk at 201-580-1758 (camp cell phone) and she will contact Mariann.

Telephone number(s) where you can be reached during the trip: (for emergency only)

Additional contacts should we be unable to reach you in case of emergency:

Child’s medical conditions and allergies

Parent/Guardian Name (Print) _____

Parent/Guardian Signature _____ Date _____

**SADDLE BROOK COMMUNITY PROGRAMS SUMMER CAMP 2019
FIELD TRIP PERMISSION FORM- POLICE/TOWN HALL/AMBULANCE CORP. T-7**

SAFETY TOWN STUDENTS ONLY K-1

PLEASE SIGN AND RETURN TO DOOR CLERK

Permission is given for my child _____ to accompany his/her camp and chaperones on a camp trip to the **Saddle Brook Police Department/Town Hall/Ambulance Corps buildings on Market Street on Friday, June 28**. The purpose of this is to engage and expose the children to developmentally appropriate activities that will enhance, enrich and broaden their horizons and camp experience. This is a bus trip, and this trip is part of the "Safety Town" program.

Children will be expected to behave in a responsible manner and follow regular camp rules.

At least one CPR/AED certified Camp Coordinator will attend this trip.

At approximately 1:00, campers and chaperones take the school bus to 93 Market Street and return to Smith School at approximately 2:30 PM.

The Door Clerk will have a direct line of communication with Mariann (Safety Town Organizer and Lead Counselor on this trip) via cell phone. If you need to reach your child (emergencies ONLY), please contact the camp Door Clerk at 201-580-1758 (camp cell phone), and she will contact Mariann.

Telephone number(s) where you can be reached during the trip: (for emergency only)

Additional contacts should we be unable to reach you in case of emergency:

Child's medical conditions and allergies

Parent/Guardian Name (Print) _____

Parent/Guardian Signature _____ Date _____