

ST. BRIGID/OUR LADY OF HOPE REGIONAL SCHOOL

101 Maple Avenue, Westbury, NY 11590 • (516) 333-0580 • www.stbolh.org



Save the Dates! Middle School Trip to Boston and Salem, Massachusetts November 7 & 8, 2019



July 2019

Dear Middle School Students and Families,

We are planning our Annual Fall Middle School Trip. We visit Boston, Washington and Philadelphia on a three-year cycle. This year we are going to Boston and Salem, Massachusetts. Our itinerary includes:


- Duck Tour of Boston on land and the Charles River aboard amphibious vehicle
- Museum of Science
- Faneuil Hall and Quincy Marketplace
- Walking Tour of the Freedom Trail
- Gallows Hill Experience in Salem including interactive Mock Witch Trial
- Gallows Hill Walking Ghost Tour

Also included: one buffet breakfast, two buffet dinners, hotel accommodations, overnight hotel security, and transportation via deluxe motor coach.

The cost for the trip is \$350.00 for students and parent chaperones. Parent chaperones are most welcome based on availability. Chaperones must have completed VIRTUS training in order to attend. [Click here to register for VIRTUS.](#)

Enjoy your summer vacation.

Yours truly,


Mr. Paul P. Clagnaz
Principal

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Middle School Trip to Boston and Salem, Massachusetts - November 7 & 8, 2019 Registration & Permission Form

Name of Child _____ Grade _____ T-shirt Size _____

Payment may be split: \$175.00 by August 15, and the balance of \$175.00 by October 21. Only cash payments will be accepted after October 21. Deadline for registration and all payments is Thursday, October 31. No refunds after November 1. If you have any questions, please email pclagnaz5561@stbolh.org. You can also register online at <http://bit.ly/stbolhboston>

Parents and/or legal guardians – If you are interested in joining us as a chaperone, (based on availability) please complete this form and return it to the school office ASAP.
Chaperones must have completed VIRTUS training in order to attend.

Name of Chaperone _____ T-shirt Size _____

I give permission for my child to attend the Middle School Trip to Boston and Salem, Massachusetts on November 7 & 8, 2019. I give permission for my child to receive emergency medical treatment if necessary.

We understand that electronic devices of any kind (cell phones, iPods, etc.) are brought at our own risk. The school and/or chaperones will not be held responsible for damaged or lost items.

Parent/Guardian Signature

Date

Emergency Contacts: Where can someone be reached during the days on the trip?

1. Name/Phone Number/Relationship to Child

2. Name/Phone Number/Relationship to Child

Does your child have allergies or take any medication that we should be aware of? Please explain.

Please Note: Prescription and over the counter medications (including Tylenol or aspirin) must be clearly marked with the child's name and dosage and given to a chaperone for safe keeping.