

**Hamilton Township Schools
NOTTINGHAM**

TRIP PERMISSION REQUEST

I hereby grant permission for _____ to
accompany a group of pupils and faculty chaperones to All **2009-2010 Nottingham
Northstar Marching Unit Activities.**

(parent/guardian signature) (date)

(student signature) (date)

IN CASE OF EMERGENCY, LIST A CONTACT PERSON TO CALL:

Name of Person: _____ Relationship: _____
Cell Phone #: _____ Home Phone #: _____ Work #: _____

Student T-Shirt Size: S M L XL XXL (Please Circle)

Please Return With Check For Band Camp

by May 29, 2009

******* Make Checks Payable to NMUPA. *******