

PARENTS USE ONLY - DO NOT RETURN

PLYMOUTH-CANTON COMMUNITY SCHOOLS
Plymouth, Michigan

2340 F7

PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Sept. 23, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Sept. 23, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Toledo University Glass Bowl 1745 Stadium Dr, Toledo, OH 43606

Telephone Number at Destination: (419) 530-3790

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: _____

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

(It is possible that a field trip can be cancelled at the discretion of Plymouth-Canton Community Schools as a precautionary measure due to the state of affairs in the United States and the world. If a deposit for the trip has been made by the student, and the District is not able to obtain a refund, the District will not be responsible for refunding any lost monies.)

Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____

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Plymouth, Michigan

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PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Oct. 7, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Oct. 7, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Novi H.S. 24062 Taft Road Novi, MI 48375

Telephone Number at Destination: (248) 449-1500

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: _____

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

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Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____

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Plymouth, Michigan

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PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Oct. 14, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Oct. 14, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Livonia Franklin H.S. 31000 Joy Road, Livonia, MI 48150

Telephone Number at Destination: 734-744-2655

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: _____

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

(It is possible that a field trip can be cancelled at the discretion of Plymouth-Canton Community Schools as a precautionary measure due to the state of affairs in the United States and the world. If a deposit for the trip has been made by the student, and the District is not able to obtain a refund, the District will not be responsible for refunding any lost monies.)

Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____

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PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Oct. 21, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Oct. 21, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Clarkston H.S. 6093 Flemings Lake Road Clarkston, MI 48346

Telephone Number at Destination: 248-623-3600

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: _____

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

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Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____

PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Nov. 4, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Nov. 4, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Ford Field Stadium 2000 BRUSH ST, DETROIT, MI 48226

Telephone Number at Destination: 313.262.2222

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: TBD

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

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Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____

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Plymouth, Michigan

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PARENT FIELD TRIP INFORMATION SHEET

Current Date:	<u>June 12, 2017</u>	Field Trip Departure Date:	<u>Nov. 9, 2017</u>
Teacher/Sponsor:	<u>Jon Thomann, and Mike Wells</u>	Field Trip Return Date:	<u>Nov. 12, 2017</u>
Class/Organization:	<u>P-CEP Marching Band</u>	School Departure Time:	<u>TBD</u>
School Building:	<u>Plymouth H.S.</u>	School Return Time:	<u>TBD</u>

Name and Address of Destination: Indianapolis, Indiana: More Details See Itinerary

Telephone Number at Destination: _____

Curricular Purpose of Trip: Marching Band Competition

Names of Supervisors: G. Jonathan Thomann and Mike Wells

Number of Chaperones Needed: TBD

Transportation Provided By: P-CCS Schools Contracted Carrier Private Driver

Student Cost: \$ N/A Permission Slip and cost due no later than: _____

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Lunch: Bring Bag Lunch Provided for additional cost: \$ _____

Additional Information: Itinerary TBA

Identification of Any Side Trips: N/A

Specific Itinerary Attached: Recorded Message Telephone Number N/A

If Applicable:

Flight or Route Number to Destination: _____

Flight or Route Number from Destination: _____

If overnight, where student will stay: _____