

Studio Walking Field Trip Form 2017-2018  
Goodwin Campus

*\*Please complete, sign and return\**

I give my child \_\_\_\_\_ permission to go to:

The Goodwin Community Garden  
Goodwin College Campus  
Connecticut River Academy (CTRA)

During the Studio Program RMS, *Monday-Thursday 3:00-4:45pm and/or  
Fridays 12:45-4:45pm* for the 2017-2018 school year.

Parent Name (Please Print): \_\_\_\_\_

\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

*\* You will be notified before a field trip that your child will be leaving  
school grounds. \**