

Dear Parent(s)/Guardian(s),

This year Gable's seventh grade students will be visiting the historic city of Atlanta, Georgia. This trip is scheduled for February 6, 2009. The cost of the trip is \$90.00 for students. This price includes:

- Deluxe Round Trip Motor Coach Transportation
- Tour of Turner Field—Home of the Atlanta Braves
- World of Coke Tour
- Martin Luther King Historic Site Tour
- Lunch at CNN (\$7 provided)
- Chick-fil-a Dinner at the Mall of Georgia
- Gable Field Trip hooded sweatshirt

During our trip, we will immerse ourselves on a guided tour of Turner Field, which offers a rare “behind the scenes” look at major league baseball. We will eat lunch at the CNN food court. We will tour the World of Coke and browse the world's largest collection of memorabilia that celebrates the refreshing beverage that was created in Atlanta in 1886. We will also have the opportunity to sample Coca Cola products from around the world. During our exciting trip, we will also tour the Martin Luther King Historic Site. We will view unique exhibits illustrating his life and teachings, visit the King Center's Library, his final resting place, his birth home, and a gift shop.

We will depart from Gable at 6:00 am on February 6, 2009. After participating in our scheduled activities, we will stop at the Mall of Georgia for a Chick-fil-a dinner and return to Gable by 10:00 pm. The trip can be paid for in full or in installments. **We will be collecting payments on Oct. 3, Nov. 7, Dec. 12, and Jan. 23.** Students will receive a receipt after each payment collection. Please mark the payment dates on a calendar at home and keep your receipts after each payment. If a student cancels ten days or less prior to Feb. 6, they will not be given a refund. **All students must pay at least \$30 by Nov. 7 to hold their spot. All payments must be paid in full by January 23rd.**

If you are interested in being a chaperone, and have filled out a school volunteer form, please indicate that below. The cost per chaperone is \$70.00 and includes all tours and transportation, both lunch and dinner, and a GMS hooded sweatshirt to wear that day. Parental help is needed and very much appreciated!

Sincerely,
Gable Middle School Seventh Grade Teachers

Please sign and return this page and the permission form to
Mrs. Parris/Mrs. Proctor by **October 3.**

We are looking forward to a fun and exciting trip to Atlanta!

_____ Please check here to indicate your commitment that your child will go on the Atlanta trip. Please circle the appropriate size for your child's hoodie.

STUDENT Hoodie

(circle size)

Adult Hoodie Sizes: AS AM AL AXL AXXL(\$3 extra)

OR

Youth Sizes: YS YM YL

_____ Please check here if your child will **NOT** be going on the Atlanta trip.

_____ Please check here if you would like to be a chaperone.

(circle size)

CHAPERONE Hoodie Size S M L XL XXL (\$3 extra)

Chaperone Name: _____

Chaperone Phone Number: _____

Chaperone Email Address: _____

Please only include your email address if you check it everyday.

Child's Name

Homeroom Teacher

Parent/Guardian Name

Parent/Guardian Signature

**Spartanburg County School District Six
Field Trip Permission Form**

School: *L.E. Gable Middle School*

Dear Parents:

Our class will be going on a field trip to: *Atlanta, GA on Feb. 6, 2009*

Each child may bring the following:

Students may bring a small pillow and blanket, electronics WITH HEADPHONES, and cell phones. Snacks will be provided on the bus. Students are responsible for all personal items.

Please be sure that your child is dressed appropriately.

Students and chaperones MUST wear the "Gable Pride" sweatshirt at all times during the trip.

*Estimated Departure Time: *6:00 am (Students must arrive at GMS by 5:30 am.)*

*Estimated Return Time: *10:00 pm*

Please circle YES or NO below, sign, and return this form.

Without this form, your child cannot be allowed to go on the trip.

 Mrs. Brooke Parris and Mrs. Trudy Proctor
(Teachers)

Yes, _____ has my permission to go on the field trip.

No, _____ may not go on the field trip.

(Parent's Signature)

My child has the following health problems: _____

My child is allergic to: _____

My child would need the following medication while on the trip:

In case of emergency, please contact: _____
(Name and Phone Number)