FAIRVIEW
PUBLIC LIBRARY

Summer Reading Challenge 2026
American Museum of Natural History
Field Trip Permission Slip

TRIP DATE: Wednesday, July 22, 2026

DEPARTURE: 9:00 a.m. (Please arrive by 8:30 a.m.)

RETURN: Approximately 5:00 p.m.

DEPARTURE & RETURN LOCATION: Fairview Public Library

Congratulations! As a successful participant in the **2026 Summer Reading Challenge**, you have earned a trip to the **American Museum of Natural History** in New York City.

DEADLINE TO RETURN PERMISSION SLIP: FRIDAY, JULY 17, 2026
Permission slips turned in after the deadline may not be accepted.

TRIP INFORMATION

- **Destination:** American Museum of Natural History, New York, NY
- **Date:** Wednesday, July 22, 2026
- **Departure:** 9:00 a.m. (Please arrive by 8:30 a.m.)
- **Return:** Approximately 5:00 p.m.
- **Departure & Return Location:** Fairview Public Library

Participants are expected to follow all library staff instructions and behave respectfully throughout the trip. The Fairview Public Library reserves the right to contact a parent/guardian if a participant's behavior becomes unsafe or disruptive.

PARTICIPANT INFORMATION

Participant Name: _____

Age: _____

Parent/Guardian Name: _____

Address: _____

_____

City/State/ZIP: _____

Primary Phone: _____

Alternate Phone: _____

Emergency Contact (if different): _____

Emergency Contact Phone: _____

MEDICAL INFORMATION

Does the participant have any food allergies?

☐ No

☐ Yes (Please list all food allergies.)

_____

_____

Other allergies or medical conditions we should know about:

_____

_____

Medications the participant may need during the trip:

_____

_____

LUNCH

Lunch will be provided for all participants.

Please select one sandwich choice:

☐ **Italian Sandwich**

☐ **Vegetarian Sandwich**

Participants may also bring additional snacks and a refillable water bottle if they wish.

Please list any food allergies or dietary restrictions that may affect your lunch:

_____

_____

Special dietary accommodations requested:

_____

_____

PERMISSION AND LIABILITY RELEASE

I, the undersigned parent or legal guardian, give permission for my child to participate in the Fairview Public Library Summer Reading field trip to the American Museum of Natural History on Wednesday, July 22, 2026.

I understand that every reasonable precaution will be taken to ensure the safety and well-being of all participants. In the event of an emergency, I authorize library staff to obtain appropriate medical treatment for my child if I cannot be reached immediately.

I acknowledge that my child is expected to follow all library rules and staff directions during the trip.

Parent/Guardian Signature: _____ **Date:** _____

Printed Name: _____

LIBRARY USE ONLY

☐ Permission Slip Received ☐ Emergency Information Verified ☐ Allergy Information Reviewed ☐ Participant Cleared for Trip