

# ELIZABETH COBB MIDDLE SCHOOL



*Excellent on Purpose*

Shelly Bell, Principal  
Giselle Marsh, Asst. Principal  
Steve Link, Asst. Principal

915 Hillcrest Ave. Tallahassee, FL 32308  
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Website: [www.cobb.leon.k12.fl.us](http://www.cobb.leon.k12.fl.us)

November 8<sup>th</sup>, 2010

Dear Parents:

We are very excited to invite your child to attend the overnight field trip to Kennedy Space Center! Cobb's Sixth Grade Magnet students have participated in this adventure for the past several years. This event has always proven to be educational as well as tons of fun for the students.

Busses will depart Cobb Middle School on April 26<sup>th</sup> at 10:30 A.M. and arrive back on April 27<sup>th</sup> at 10:00 P.M. The \$150.00 fee for this adventure will include admission to the park, chartered bus transportation, lunch and dinner on Tuesday, breakfast on Wednesday morning, and a Cobb t-shirt. Students will receive their Cobb t-shirt prior to the trip and must wear it in order to be allowed on the bus. Students will need to bring additional money for lunch and dinner on Wednesday, snacks or drinks, and any souvenirs they may want to purchase in the park.

Due to limited space we can only accept the first 100 students who pay the first payment of \$75 by January 21, 2011. The second payment of \$75 must be paid by March 4, 2011. Payments will be collected by Ms. Patrick in room 13.

For questions, please contact Mary Beth Patrick by e-mail [parickm@leonschools.net](mailto:parickm@leonschools.net) or call 488-3364.

*In keeping with Cobb Middle School's Discipline Policy, any student assigned In-School Suspension for 1 day or more may not participate in any school activity nor attend any school activity during a 5 school day period beginning with the first date of ISS or 10 school day period beginning with the first date of Out-of-School Suspension.*

Sincerely,

Ms. Patrick

My child (print name) \_\_\_\_\_ has permission to go on the Kennedy Space Center Overnight Adventure on April 26<sup>th</sup> - 27<sup>th</sup>, 2011. I have read the criteria and requirements for my child to participate and accept them as stated.

\_\_\_\_\_  
Parent Name (print)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Number (cell or home)

\_\_\_\_\_  
6<sup>th</sup> pd teacher

If you are interested in chaperoning please know that we have a VERY limited number of spaces available and we will fill in the chaperone spots in a first come first serve basis. Chaperones must go through a rigorous background check through the Leon County School System and Kennedy Space Center. If you are interested in chaperoning please fill out the lines below.

\_\_\_\_\_  
Parent Name (print)

\_\_\_\_\_  
Parent Email Address



*"Leon county Schools does not discriminate against any person on the basis of gender, marital status, sexual orientation, race, religion, national origin, age, or disability."*