



NOTRE DAME HIGH SCHOOL

Member of the Middle States Association of Colleges and Secondary Schools
3417 Church Road, Easton, PA 18045
610 868-1431 Fax 610 868-6710 www.ndcrusaders.org

FAMILY TRIP AND/OR COLLEGE VISIT FORM

Student: _____ Homeroom: _____

Destination: _____

Dates of Trip: _____

Date student will return to school: _____

PARENTS: By signing this form you are accepting the responsibility for taking your child out of school and for all materials and assignments presented in the classroom. Classwork must be made up according to the individual teacher's schedule. Please arrange for your student to consult with their classroom teachers before leaving for the trip to obtain assignments. Obtaining assignments as well as submitting said assignments as per the teachers instructions/syllabus is your child's responsibility. Notre Dame will not gather assignments for the student attending a vacation, trip or college visit.

Parent Signature: _____ Date: _____