THE SCHOOL DISTRICT OF PHILADELPHIA

Class Trip Request Form (EH-81)

SCHOOL: Mastbaum REGION: 13 MONTH: 1 YEAR: 2026

PERMISSION IS HEREBY REQUESTED FOR CLASS VISITS LISTED BELOW

PRINCIPAL

DIRECTIONS

1. Use a separate EH81 for each class trip
2. Names of adults accompanying students (1 adult to 10 students) within State; 1 - 5 out of country
3. See reverse side for additional guidelines for class trips
4. No school police as chaperones for class trips

TEACHER	GRADE OR GROUP	NUMBER OF STUDENTS	PLACE TO BE VISITED (GIVE LOCATION)	DATE (MO. DAY)	TIME LEAVING SCHOOL	TIME RETURNING TO SCHOOL	BUS SERVICE REQUESTED (YES - NO)	APPROVED (✓) REGIONAL SUPT.	APPROVED (✓) SCHOOL & ADM. SERVICES
Kim Walker	10-12	40	Independence Hall	3/3/26	9:30	1:00	Yes		
Emily Loehmer		39	Visitor Center						
Liam Kelly			599 Market St,						
Nicole Friel			Philadelphia, PA 19106						
Lashaunda Robinson									
Anthony Rivera									
Khaleelah Ahmad									
			No Child will						
			be excluded due						
			to cost.						

Complete the following information:

- Cost per student: Free
- Name of Transportation Provider (from approved vendor list): Class 1 Bus Co.
- Name of Transportation Provider (from outside vendor with approved insurance): N/A
- Funding Source (Indicate method of payment): The Fund For the School District of Philadelphia

Required information to be attached:

- Itinerary
- Names/ID numbers of students attending
- ACORD certificate approved by Risk Management where applicable (please refer to 'Revised Insurance requirements for Class Trips").
- Names / Number of Chaperones
- After school hours identify how students will return home

No child will be excluded due to cost

Every student will wear an identification badge

Lead Teacher will be in possession of the names and telephone numbers of students/parents

Sign both sides of the EH-81

approved, RW 1/23/26

REGIONAL SUPERINTENDENT	DATE	OFFICE OF SCHOOL OPERATIONS	DATE
NCLB LIAISON (signature required if using Title I Funds)	DATE	HEALTH, SAFETY AND PHYSICAL EDUCATION/ATHLETICS (signature required for sports/athletic events)	DATE

13	Mastbaum	1	2026	
Region	School	Month	Year	Principal's Signature

GUIDELINES FOR CLASS TRIPS

REFER TO POLICY AND PROCEDURES MANUAL, SECTION NO. 103.1 TO 103.5

TRIPS WITHIN / OUTSIDE PHILADELPHIA

1. Trips to museums, the Zoological Gardens, industrial plants, places of historic or community importance, radio and television studios, and to rehearsals or performances sponsored by the School District are approved.

2. Trips to Amusement Parks **will not** be approved (exception: when students are invited to participate in a scheduled academic competition and/or a performance proper documentation i.e. the official invitation must be attached to the EH-81). However, Amusement Park Rides continue to be disapproved.

3. Supervision for trips must be one adult per ten students, outside the continental U.S. 1 to 5 provided for trips, the following personnel and/or services must be provided on specialized trips:

   a) **Swimming or boating - an adult certified in one of the following:**
      - Senior lifesaving (American Red Cross)
      - Philadelphia School District Swimming Certification
      - Water safety instructor (American Red Cross)
      - Y.M.C.A Pool Director Certification

   b) **Skiing**
      - Certified ski instructor (may be a staff member at the resort)
      - First-aid facilities

   c) **Ice Skating**
      - Instructor (may be a staff member at the rink)
      - First-aid facilities

   d) **Tobogganing (only on snow surfaces)**
      - First-aid facilities

   e) **Other sport trips**
      - An adult certified in the sport
      - First-aid facilities

4. Trips extending beyond city curfew are not approved; responsible adults must meet students at a designated location when students return from a trip in the evening, and school personnel must remain until all students have been met.

5. Trips that exclude students who cannot meet financial costs are not approved.

6. Trips that are sponsored privately by individuals, including any staff members, or groups are not approved; there is to be no dissemination of information, collection of funds, use of class lists, or solicitation of students.

7. Private vehicles may not be used by school personnel to transport students on trips.

8. State how the class trip ties into the core curriculum planning, scheduling, timeline or grant activity.

THE SCHOOL DISTRICT OF PHILADELPHIA

PARENTAL PERMISSION

TRIP INFORMATION

School	School Phone	Grade/Room	Date Prepared
Mastbaum AVTS	215-400-7220	10-12	1/21/26

Teacher	Destination
Walker	Independence Hall Visitors Center 599 Market St Philadelphia, PA 19106

Educational Purpose of Trip: This experiential learning trip helps students explore how Black Philadelphians shape ideas of freedom in early America

Date of Trip	Leave Time	Return Time	Trip Itinerary (summary)
March 3, 2026	9:45 am	1:00 pm	Travel to Visitors Center and complete the walking tour.

Method of Transportation	Cost to Student	Student Lunch
Class 1 Bus Co.	☑ Free $____	☑ Bring ☐ Buy ☑ Provided ☐ Not Needed

Please complete and detach the bottom part of this form and return to teacher

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STUDENT INFORMATION

Name of student: _____ I.D.#: _____ Date of Birth: _____

PARENT/GUARDIAN INFORMATION

1. Parent/Guardian: _____ Home Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

2. Parent/Guardian: _____ Home Address: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Student lives with (check all that applies): ☐ Father ☐ Mother ☐ Guardian

EMERGENCY CONTACTS

If the parents/guardians cannot be reached, the school will call the people listed below. The people listed below should be responsible individuals who can: 1) give permission to administer health care; 2) pick up your child if your child is ill; 3) have the authority to speak on behalf of the parents or legal guardians.

Name: _____ Name: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

HEALTH INFORMATION

If permission is granted, please provide the following medical information or if your child does not have any of the health conditions listed below, please write "*none*".

Medication/s being taken by student: _____

Allergies to foods, drinks, insect bites, medications, other: _____

Other medical information: _____

Physician's Name: _____ Phone: _____

Medical/Hospital Insurance: _____ Group: _____ Type: _____

I have read the trip information to: _____ on _____.

Check one: my child ☐ may ☐ may not go on this trip

I understand that in case of any emergency requiring medical treatment, every effort will be made to reach one of the people listed above. If none of these people can be contacted, I authorize the school to give consent to treatment as deemed necessary by emergency responders.

Print Name of Parent/s or Guardian/s: _____

Signature of Parent/s or Guardian/s: _____ Date: _____

A copy of this form is to be kept on file until the end of the school year.

THE SCHOOL DISTRICT OF
PHILADELPHIA

School: Mastbaum

Trip Date: March 3, 2026

Itinerary:

Time		Activity
9:45 - 10:15 am		Depart Mastbaum
10:15 - 10:30 am	Bathroom visit	Arrive at Independence Hall Visitors Center
10:30 - 12:00 pm		Begin Black Metropolis 101 walking tour
12:00 - 12:30 pm		Lunch (picnic)
12:30 pm	Bathroom visit	Leave Independence Hall Visitors Center
1:00 pm		Return to Mastbaum

Educational Purpose: This experiential learning trip helps students explore how Black Philadelphians - often left out of traditional histories - shaped ideas of freedom in early America. Through pre-lessons, site visits, and reflection, students will analyze local spaces as historical sources, compare different definitions of freedom, and understand how the past continues to shape the present.

Field Trip Meal
Order Form

Teacher Name Walker

Grade 10-12

Classroom # 313

Date Needed 3/3/26

Date Ordered ~~1/29~~ ~~1/29~~ 1/26

Number of Students 39

Breakfast (Lunch) Please circle meal(s) needed.

Time meal will be picked up 9am

Principal/Coordinator Signature:

Please order field trip meals 14 days in advance.

The Division of Food Services is not responsible for the meals once removed from the building. Leftovers may not be returned to the Food Services Division. The field trip Supervisor/Coordinator will be responsible for storing and serving all items at the proper temperatures.

Black Metropolis 101 Walking Tour March Class List- March 3, 2026

40 total	Name	10-12	ID Number	Health Conditions
1	Kevin Thach	12	8862981	
2	David Wilson	12	8754530	
3	Ajnique Jeter	12	8899217	
4	Lylani Ramos	12	8866325	
5	Caiaah Bey	12	8725341	
6	Jaden Caraballo	12	8764892	
7	Jacob Dukes	12	8816639	
8	Sulianie Quinones	12	9111741	
9	Arad Ginez	12	8831211	
10	Amirah Hartage	12	8886240	
11	Maya Martinez	12	8113297	
12	Mia Osorio-Grant	12	8764800	
13	Patience Alston-Gieger	12	10109468	
14	Samantha Simmons	12	8820872	
15	Joanna Kirk	11	8635596	
16	Esther Cleophat	11	9039248	
17	Shawn Stinson	10	9031884	
18	Anthony Marrero-Lugo	10	9444192	
19	Henry Martinez	10	8543773	
20	Armando Pena Arevalo	10	10155686	
21	Kyri S. Bacon	10	9555177	
22	Nikeace K. Blackwell	10	9188639	
23	Kelis A. Dunn	10	9482809	
24	Sumayah A. Fleet	10	9477270	
25	Peyton C. Frederick	10	9146180	

26	Arlette Ginez	10	9441283	
27	Marianys Gonzalez	10	9449914	
28	Haniyah Heard	10	9300649	
29	Henna Heard	10	9300657	
30	Aliyyah A. Jackson	10	9462007	
31	Amani K. Jackson	10	9440936	
32	Ethan Jiang	10	10128878	
33	Emily S. Lunkenheimer	10	9448895	
34	Bao G. Ly	10	9594173	
35	Rancel P. Paulino-Decastro	10	9451147	
36	Juliana Ramos-Reyes	10	9449663	
37	Michael Rodriguez	10	9426091	
38	Mikayla A. Santiago	10	9327320	
39	Raymond S. Toledo	10	9425312	
40	Shalesha Holmes	10	9477220	