THE SCHOOL DISTRICT OF PHILADELPHIA

Class Trip Request Form (EH-81)

SCHOOL: Mastbaum AVTS REGION: LN#4 MONTH: 10 YEAR: 2025

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 Matt Lessie Monique Darby	10	27	Historical Society of Pennsylvania 1300 Locust St. Philadelphia, PA 19107	11/24	10:00 am	2:00 pm	Yes		
			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 I bus Co
- Name of Transportation Provider (from outside vendor with approved insurance): n/a
- Funding Source (Indicate method of payment): Check

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

Copies RW 10/17/25

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

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

LN#4 | Jules E Mosbaum | 11 | 2025 | [signature]
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	10th	10/14/25

Teacher	Destination
Kim Walker	Historical Society of Pennsylvania

Educational Purpose of Trip: Visit HSP to study Octavius Catto and democracy in 19th century Philadelphia

Date of Trip	Leave Time	Return Time	Trip Itinerary (summary)
11/24/25	10:00 am	2:00 pm	Go to HSP, learn about democracy, return to Mastbaum

Method of Transportation	Cost to Student	Student Lunch
Class I 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 AVTS

Trip Date: Nov. 24, 2025

Itinerary:

Time	Activity
10:00 am - 10:30 am	Pick up at Mastbaum, drop off at HSP
10:30 am - 12:00 pm	HSP 19th century democracy lesson
12:00 pm - 12:30 pm	Lunch
12:30 pm - 1:30 pm	19th century Philadelphia Social and Political Walking Tour
1:30 pm - 2:00 pm	Pick up at HSP, return to Mastbaum

Students will travel to the Historical Society of Pennsylvania to engage directly with primary sources related to Octavius Catto and 19th century democracy in Philadelphia. Students will also participate in a Social and Political walking tour, learning about the social and political spaces that supported emancipation and stability for 19th century black Philadelphians. This experience will deepen their understanding of 19th century black civic leadership in Philadelphia and democracy in Philadelphia in connection with the U.S. Semiquincentennial.

Historical Society of Pennsylvania

PHILADELPHIA'S LIBRARY OF AMERICAN HISTORY

Onsite Field Trip and Virtual Lesson Confirmation Form

Thank you for scheduling an onsite field trip and/or a virtual lesson with the Historical Society of Pennsylvania! Please review the form below for accuracy, and return a signed/completed copy to Katie Clark (kclark@hsp.org) at your earliest convenience. If you have any questions, please do not hesitate to contact us.

Onsite Field Trip: ✓

Virtual Lesson: _____ **Zoom Link:**

Program Details	
Date: Monday, November 24, 2028	
Start Time: 10:30AM	**End Time:** 12:00PM
Topic: 19th C. Black Activism/1838	

Group Details	
School/Organization: Mastbaum AVTS	
Grade Level: 10	
Number of Students: 27	**Number of Chaperones:** 3
Teacher/Primary Contact: Kimberly Walker	**Email:** kawalker@philasd.org
Is your school a part of the Connelly Access Program (CAP)? Yes / **No**	

Payment Details		
VIRTUAL	**ONSITE**	
All virtual lessons from HSP are free of charge.	Public/charter school part of the School District of Philadelphia?	Yes: Free
		No: See Below
	Topic chosen from list: $150	
	Specially-curated topic: $250	

Historical Society of Pennsylvania

PHILADELPHIA'S LIBRARY OF AMERICAN HISTORY

HSP can accept payment for onsite field trips via check or Credit Card. Payment may be completed before the field trip or on the day of the scheduled visit. If applicable to your onsite visit to HSP, please indicate below how you would like us to process payment. We have attached an invoice for your convenience and records. Please do not hesitate to reach out with any questions!

Payment Method	Method Choice	Details
Credit Card payment before the visit date.		We will reach out to you and schedule a time to process the payment over the phone.
Credit Card payment day of the visit.		Please bring the card with you on your scheduled visit. We will process the payment during your time at HSP.
Check payment before the visit date.		Checks should be made out to **The Historical Society of Pennsylvania** and can be mailed to the following address: Historical Society of Pennsylvania 1300 Locust Street Philadelphia, PA 19107 ATTN: Katie Clark
Check payment day of the visit.		Checks should be made out to **The Historical Society of Pennsylvania.**

Teacher/Primary Contact Name: Kim Walker

Teacher/Primary Contact Signature: K. Walker

Date: 10/13/25

INVOICE

CLASS I BUS COMPANY, INC.

INVOICE # 209M-2023
DATE: OCTOBER 13, 2025

13420 Damar Drive, Unit M
PHILADELPHIA, PENNSYLVANIA 19116
(215) 934-5885
FAX (215) 677-7271
Class1Bus@Yahoo.com

TO Mastbaum High School
3116 Frankford Ave.
Phila PA 19144

ediaz@academiesinc.org

BILLING DATE	CUSTOMER ORDER NUMBER	SALESPERSON	TOTAL AMOUNT DUE DATE
11/24/2025		Kenneth	Day Of Trip

QUANTITY	DESCRIPTION	PRICE	TOTAL AMOUNT
1-Bus	11/24/2025 -Mastbaum High School To Historical Society (P/U: 10:00AM - Leave 1:30PM)	$385.00	$385.00

NO PERSONAL CHECKS EXCEPTED

SUBTOTAL	$385.00
SALES TAX	$0.00
TOTAL	$385.00

Make all checks payable to Class I Bus Company

THANK YOU FOR YOUR BUSINESS!

African American History Honors Class List

Name	ID Number	Health Conditions
Sumayyah N. Abdul-Quddus	9449590	
Kyri S. Bacon	9555177	
Nikeace K. Blackwell	9188639	
Tymiya D. Brown-Johnson	9227158	
Erez Dayan	10145569	
Kelis A. Dunn	9482809	
Sumayah A. Fleet	9477270	
Peyton C. Frederick	9146180	
Arlette Ginez	9441283	
Marianys Gonzalez	9449914	
Haniyah Heard	9300649	
Henna Heard	9300657	
Jayla G. Hicks	9226550	
Aliyyah A. Jackson	9462007	
Amani K. Jackson	9440936	
Ethan Jiang	10128878	
Jayla Johnson	9125560	
Angel Lozada-Pagan	9616521	
Emily S. Lunkenheimer	9448895	
Bao G. Ly	9594173	
Rancel P. Paulino-Decastro	9451147	
Juliana Ramos-Reyes	9449663	
Asyah H. Roberts	8957744	
Michael Rodriguez	9426091	
Mikayla A. Santiago	9327320	

Raymond S. Toledo	9425312	
Justin R. Wickliff	9571381	

Field Trip Meal
Order Form

Teacher Name Walker
Grade 10
Classroom # 313
Date Needed 11/24/25
Date Ordered 10/14/25
Number of Students 27

* Please, no milk

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

Time meal will be picked up 9^30 am

Principal/Coordinator Signature:

ZBD

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.