



PAUL B. GREGORSKI II
Principal

MATTHEW FITZSIMMONS
Guidance Department Head

KASEY GRIBBLE
RACHAEL PALKO
RENEE CHERNIN
Counselors

Dear Parent/Guardian:

The Western Wayne Guidance Department is planning a trip to Allentown to tour universities on April 13, 2023. The trip will include tours of Lafayette College, DeSales University and Moravian University. Seating is limited to 40 students, so it will be on a first come, first serve basis. The cost of the trip will be \$55.00 to cover the charter bus. Please make checks payable to **Western Wayne High School**. Students can bring money for any extra food or other items they may want to purchase. Students should dress in school appropriate attire.

The itinerary for the trip is as follows:

- Depart WWHS at 6:45 AM (please arrive around 6:30)
- Arrive in Allentown around 8:30
- Tour of Lafayette College – 8:30 – 9:30
- Tour & Admissions Presentation at DeSales University – 10:15 – 12:00
- Lunch provided by DeSales University – 12:00 – 1:00
- Tour & Information session Moravian University – 2:00 to 3:30
- Arrive back at WWHS – 5:00 (please have a ride waiting for you)

If your child would like to attend, please sign and return the attached permission slip to the Guidance Department by March 31, 2023.

Thank you,

Matt Fitzsimmons
School Counselor

BOARD OF EDUCATION

Rick Hoch, President Dana DeSiato, Vice President Jeffrey Gogolski, Treasurer
James Collins, Gary Enslin, William Gershey, Joseph Gombita, Michael Ochlan, Ethan Wood



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Please sign and return by March 30, 2023:

I give permission for my son/daughter, _____ to attend the Allentown College
Tour Trip on April 13, 2023.

Parent Signature: _____

Student Signature: _____

Date: _____

Parent Cell Number: _____

Student Cell Number: _____

In doing so, I agree to the following:

1. In case of an emergency, I grant the Supervisor the right to authorize medical care if none of the persons named below can be reached.
2. I agree to pay the expense of a medical emergency for my child. My health insurance is with _____ Policy No. _____.
3. The school is not responsible for damage or loss of property personally owned by my child.

Contact in case of an emergency:

Name/Relationship/Home/Work: _____

Name/Relationship/Home/Work: _____

Name/Relationship/Home/Work: _____

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