

**TRUMBULL COUNTY BOARD OF DEVELOPMENTAL DISABILITIES  
FAIRHAVEN SCHOOL PROGRAM**

420 Lincoln Way, Niles, OH 44446

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**PARTICIPATION IN FAIRHAVEN SWIM PROGRAM  
2023 – 2024 SCHOOL YEAR**

My signature below indicates that I acknowledge that the swim program at Fairhaven School is an integral part of the preschool and school-age curriculum for all enrolled students as stated in the Parent Handbook.

Child's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

My child is a:  Swimmer (*without flotation device*)       Non-Swimmer (*with flotation device*)



**FIELD TRIP PERMISSION FORM  
2023 – 2024 SCHOOL YEAR**

Fairhaven School plans various class field trips throughout the course of the school year.

***By signing this form below, you grant permission to have your child participate in these trips for the entire school year.***

You will be notified of the date, time, and destination of each trip. At that time, should you ***not*** want your child to participate, you must notify your child's teacher in writing and keep your child home for that day.

Should you have any questions on this, please contact your child's teacher.

Student's Name \_\_\_\_\_, has my permission to participate in field trips for the upcoming school year.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_