

Dear Parents:

A field trip is planned for your child's class. Below is information related to the upcoming trip. Please sign and return the lower portion of this form and return it to the school as soon as possible. If you have any questions, please contact your child's homeroom teacher at 732-8242.

Group or Class: _____

Teacher(s): _____

Date of Trip: _____ Destination: _____

Cost to Student: _____

Anticipated departure time: _____ Anticipated time of return: _____

Parent Permission Slip

YES! I give my permission for my child _____ to attend the school trip to _____. I give permission for the teachers in charge to secure necessary emergency medical attention on my behalf should it be necessary.

Signed, _____ (Parent/Guardian)

NO! I do not give permission for my child to attend the field trip.

Signed, _____ (Parent/Guardian)