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|  | **SCHOOL FIELD TRIP PERMISSION FORM** |
|  |

As parent/legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I grant (Print Student’s Name)

permission for him/her to participate in a fieldtrip to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Destination)

Nature or purpose of the trip:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date/time leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date/time returning: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost of the trip per student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mark one: □ I’d like to volunteer to be a chaperone

□ No, I cannot be a chaperone

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| --- | --- | --- |
|  |  |  |
| Parent’s Name |  | Parent’s Phone Number |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of Parent/Guardian |  | Date |