

Field Trip/Event Permission Slip

Field Trip Date:	Field Trip Location:	
Students will leave school at (time):	Students will return to schoo	ol at (time):
Transportation plan:		
Meals plan:	Fees:	
Other relevant details regarding this trip:		
	CUT HERE	
Student's Name:	Student's Teacher	Student's Grade:
Health concerns or dietary restrictions (<i>please specify below, if applicable</i>):		
Emergency Contact Name:	Relationship:	Phone:
I give permission for my child, identified above, to participate in the field trip/event described above. I understand that my child must be in good standing on the day of the field trip/event to be able to attend. If my child is issued an in-school or out-of-school suspension on the date of the field trip/even he/she will not be allowed to participate. Moreover, parent also understands that student will be subject to the Student Code of Conduct for inappropriate behavior that may occur during the field trip.*		
Parent/guardian name:	Phone:	
Parent signature:	Date:	

*By signing parent/legal guardian agrees to hold harmless and to indemnify the School District from all claims, actions, damages, and liability in connection with any act by your student that would directly lead to the loss of life, personal injury and/or property damage.