



2014 – 2015 School Year
Field Trip Permission Slip

I/ We are granting permission for our son/ daughter to attend all field trips with the Midland School for the 2014 – 2015 school year (September 3, 2014 through August 12, 2015). I understand teacher/ s will send home specific details regarding trip date, destinations, lunch plans, money needed for field trip and/ or appropriate clothing, application of insect repellent/ sunscreen, etc. needed prior to trip date.

Name of Student _____
Please *Print Name Clearly*

Permission Granted _____
(Signature)

For those students who receive medications at school please check the appropriate box below for your child:

- Do not give medication on the trip.
- Give medication ___ prior to/ after ___ the trip.
- I will make arrangements to give medication on the trip myself and discuss these arrangements prior to trip with teacher and school nurse.
- I will contact the Midland school nurse to make other arrangements.