

FIELD TRIP PERMISSION SLIP

| | (child's name) has my permission to go on a | | | |
|------------------------------|---|---------------------|------------------------|--|
| Field trip to participate in | | | (event) at | |
| | | | (place) on | |
| | (date) from | to | (times). | |
| School will begin and end | at the usual time. I u | ınderstand that m | ny child will wear a | |
| seatbelt while in the car, a | nd that all chaperon | es driving will hav | ve a seatbelt for each | |
| child. | | | | |
| | | | | |
| Signature of parent or gua | ordian | | | |
| Print | name | | | |
| Dato | | | | |