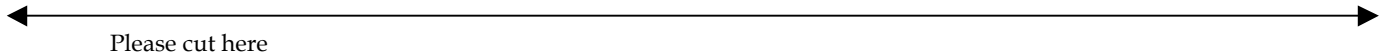


# Bow High School Field Trip Permission Form

Your child's class will be attending a field trip to; \_\_\_\_\_

Date	Time of Departure
Transportation	Time of Return
Cost	

Please return this permission slip by: \_\_\_\_\_



Please cut here

Teacher \_\_\_\_\_ Date of Field Trip  
\_\_\_\_\_

Field Trip To \_\_\_\_\_

Enclosed is \$ \_\_\_\_\_ to cover the cost of the trip. (Exact cash or check made payable to Bow High School)

**In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:** Name \_\_\_\_\_ Phone \_\_\_\_\_

I, \_\_\_\_\_, request that my child, \_\_\_\_\_, participate in the event described above. I understand that this event will take place under the guidance and supervision of teachers from Bow High School and that all school rules and policies in effect during the regular school day will also apply during the trip event and that any infraction of these rules will be dealt with appropriately by school authorities. I also understand that as a parent/guardian of this child, I remain fully responsible for any legal responsibilities which may result from the personal actions taken by this child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date