

MADISON COUNTY SCHOOL SYSTEM

Field Trip Permission Slip

School: Madison County High School Grade: 9 - 12 Date: _____

Memorandum to Parents:

On _____ our class will be taking a field trip to _____ *Various Schools/Parks* _____
Date Name of Place

at _____ *TBA/See Schedule* _____ at approximately _____ *TBA* _____ o'clock and return
Location time

to _____ *See Schedule* _____ at approximately _____ *TBA* _____ o'clock.
Place to return time

Mode of transportation: _____ *Personal Car/School Bus* _____.

We would like for your child to accompany us on our trip. Supervision will be provided for all students. Your child is expected to follow all school/classroom rules.

In the event of a date change you will not receive another permission slip; however, you will be notified of the change.

Please complete, sign and return the lower portion no later than _____.
Date

Teacher's Signature

Principal's Signature

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Teacher Name: _____ School: Madison County High School .

I wish I do not wish

To give my permission for my child _____
Child's Name

to accompany your group on the field trip to _____
Name of place

at _____ on _____
Location Date of trip

Signature of Parent

DATE