



Your child's class will be attending a fieldtrip to:

<b>Date:</b>	
<b>Time:</b>	
<b>Location:</b>	

<b>Cost:</b>	
<b>Notes:</b>	

**Please return this permission slip by:**

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I give permission for my child, \_\_\_\_\_, to attend the field trip to \_\_\_\_\_ on \_\_\_\_\_ from \_\_\_\_\_ am to \_\_\_\_\_.

\_\_\_\_ Yes, I will be attending my child's field trip

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 Number)*

\_\_\_\_\_

\_\_\_\_\_

*(Name)*

*(Phone Number)*

\_\_\_\_\_

\_\_\_\_\_

*(Guardian Signature Parent/)*

*(Date)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

