

Permission Slip

Your child's class will be attending a field trip to: _____

SCHOOL NAME:	
Date of trip:	
Location:	
Cost:	
Transportation:	
Notes:	

Please return this permission slip by: _____

I give permission for my child _____ in room _____	
to attend the ()trip to _____ on	
from _____ to _____	
Enclosed is \$ _____ to cover the cost of the trip. (Exact cash or check made payable to the 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 _____
Parent/Guardian Signature _____	Date _____