My child has permission to attend a field trip to :

|  |
| --- |
| Name of Destination:  |
| Address: | Contact Number: |
| Description of Trip: |
| Date of Trip: | Departure Time: | Return Time: |
|  |
| Special Instructions |
| **CHILD’S NAME** | **PARENT SIGNATURE & DATE** (1st Initial & Last Name) | **ATTENDANCE** |
|  |  | Leave(location) | Arrive(location) | Hour 1 | Hour 2 | Leave(location) | Arrive(location) |
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Vehicle License Plate Number:

Adults attending field trip:

**FEEL FREE TO CUSTOMIZE THIS FORM FOR YOUR BUSINESS**