

FIELD TRIP PERMISSION SLIP

Dear Parents/Guardians,

Our class will be going on a field trip to _____.

Date: _____ Time: _____ Cost of trip: _____

Special Notes/Accommodations: _____

PLEASE FILL OUT AND RETURN THE BOTTOM PORTION OF THIS FORM BY: _____

THANK YOU!

X>-----

My child(ren) _____

Have my permission to attend the field trip on _____.

PLEASE CHECK ONE: ☐ **YES I WOULD LIKE TO VOLUNTEER AS A CHAPERONE**

☐ **NO, I AM UNABLE TO ATTEND THIS TRIP.**

Parent's/Guardian's Name: _____

Parent's/Guardian's Phone Number(s): _____

Parent Signature: _____