

Grace Education Academy



Together We Achieve the Extraordinary

Field Trip Permission Form

Dear Parent or Guardian,

Your child is going on a field trip. Please read the information listed below, then sign and return the permission slip at the bottom of this form by _____.

Field Trip Information:

Date: _____

Location: _____

Purpose: _____

Cost: _____

Cash or check payable to: _____

Means of Transportation: _____

Leave school: _____ Arrive back at school: _____

Special Instructions: _____

Save this part of the form for future reference.

Cut here-----*Cut here*

Sign this part of the form and return it to your child's teacher.

_____ has permission to attend a field trip to
_____ on _____ from
_____ to _____.

Enclosed, please find cash/check in the amount of _____ to cover the cost of the trip.

I give my permission for _____ to receive emergency medical treatment. In an emergency, please contact:

Name: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____