

Angleton ISD Student Travel Guidelines



Activity or Field Trip Permission Form

Campus: _____

_____ will be participating in the following activity or field trip:
(Class, Grade, or Group)

Activity/Field Trip: _____

Date(s): From ____/____/____ To ____/____/____

On Campus: Yes No / Location: _____

Scheduled time of departure: _____ Scheduled time of return: _____

Type of transportation (if required): School Bus or Other: _____

Any additional information:

Parent/Guardian: Please complete the section below and return to school

- I authorize my student to participate in the above listed activity
- I do not authorize my student to participate in the above listed activity

Student's Name: (Print) _____

Phone number in case of emergency: (Area code) (_____) _____ - _____

Name of Parent/Guardian: (Print) _____

Signature of Parent/Guardian: _____

Date: ____/____/____

Cancellation: Unforeseen situations can result in cancellation or a student may become ineligible to participate in the event. In such cases, Angleton ISD assumes no financial responsibility for any monies lost due to this action.