

School/Parish \_\_\_\_\_ School/Parish Year: 20\_\_ through 20\_\_

**LOCAL FIELD TRIP INFORMATION**

The following is information about the Local Field Trip. After you have reviewed, please fill out and sign the **Form B-2** *Local Field Trip Permission* and, if applicable, the *Medication Consent Form and Waiver* (on the back of the *Local Field Trip Permission*) and return to the Parish with any costs for the field trip, no later than \_\_\_\_\_.

Name of place to be visited: \_\_\_\_\_

Address or Location: \_\_\_\_\_

Educational/Formational Purpose of the Field Trip: \_\_\_\_\_

\_\_\_\_\_

Date of Trip: \_\_\_\_\_ Time leaving: \_\_\_\_\_ Returning: \_\_\_\_\_

Additional Stops: No \_\_\_ Yes \_\_\_ Reason: \_\_\_\_\_

Cost: \_\_\_\_\_ Pack a Meal: \_\_\_\_\_ Yes \_\_\_ No (Included in price or not part of the trip)

Transportation provided by: \_\_\_\_\_

Field Trip Coordinator(s): \_\_\_\_\_

Dress for the field trip is: \_\_\_\_\_

**Behavior expectations:** All participants will follow the directions of the person in charge; catechist, youth minister, chaperone, driver, etc., using seat belts and any other directives given.

**Other: Drivers must follow the lead driver's, RE's or Youth Coordinator's instructions. Unauthorized stops are not permitted.**

**Special Instructions:** \_\_\_\_\_

Field Trip Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DRE/Youth Ministry Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_