

PERMISSION FORM

FIELD TRIPS WITHIN THE DISTRICT

_____ has my permission to accompany the class on all
(Student's Name)
field trips **within** the district during the school year.

Grade level of your child: (please circle) **Grade 6** **Grade 7** **Grade 8**

A letter specifying trip destinations will be sent prior to each field trip.

Student's Homeroom Teacher _____

Parent/Guardian Signature

Date

_____ Yes, I would be able to chaperon. Phone Number: _____

_____ No, I would not be able to chaperon.