

Field Trip Permission Slip

Date: _____

Dear Parents:

On _____ our class will be taking a field trip to _____ at _____ . We plan to leave school at _____ and return at approximately _____ .

The cost of this trip will be \$ _____. We would like your child to accompany us on this trip. Kindly sign the permission slip and liability waiver below and return it school no later than _____ .

NO CHILD WILL BE ALLOWED TO GO ON THE FRILD TRIP UNLESS THE PERMISSION SLIP IS SIGNED AND RETURNED.

(Teacher)

-----CUT HERE-----

In the unlikely event of an accident I give full authority to the teacher or chaperone present to get my child any medical attention they deem necessary. We hereby release and save harmless St. Bernadette Catholic School and all employees from any and all liability for any and all harm arising to my/our son/daughter as a result of this trip.

Student Name: _____ Grade: _____

_____ Will be going on the trip.

_____ Will not go on the field trip.

(Signature of Parent/Guardian)

Date: _____