

## FIELD TRIP PERMISSION SLIP

\_\_\_\_\_ (School Name) is planning the following field trip to:

*Place:* \_\_\_\_\_

*Date(s):* \_\_\_\_\_

*Teacher(s):* \_\_\_\_\_

*Approximate Time:* \_\_\_\_\_

*Cost of Field Trip:* \_\_\_\_\_

Transportation Mode:     School District Bus  
                                   Contracted Bus Service by \_\_\_\_\_  
                                   Other \_\_\_\_\_

I, \_\_\_\_\_ (Parent/Guardian's Name), give my  
child, \_\_\_\_\_ (Student's Name), permission  
to go on the field trip to \_\_\_\_\_ (Place) on  
\_\_\_\_\_ (Date) with \_\_\_\_\_ (Teacher's Name).

As a parent of legal guardian, I remain fully responsible for any legal consequences that may result from any person actions taken by the named student. My son/daughter understands that all school rules must be obeyed. I understand by signing this paper that I have read, understand and am in agreement with all of the above information and the guidelines set forth by the Richmond Community School District and the Student Code-of-Conduct. I also give permission to the chaperone to seek emergency medical attention for my child if necessary.

\_\_\_\_\_  
**Parent/Guardian's Signature** **Date**

### EMERGENCY INFORMATION

*Parent/Guardian Name:* \_\_\_\_\_

*Parent/Guardian Telephone:* \_\_\_\_\_

*Alternate Emergency Contact Name:* \_\_\_\_\_

*Alternate Emergency Contact Telephone:* \_\_\_\_\_

*Insurance Company:* \_\_\_\_\_

*Policy Number* \_\_\_\_\_