

# Parental Consent for Field Trip

## Student Information

Student Name

Grade

Teacher

## Field Trip Details

Destination

Date

Departure Time

Return Time

## Parent/Guardian Information

Parent/Guardian Name

Contact Number

Email Address

## Emergency Contact

Name

Relationship

Phone Number

Medical Information

Allergies/Medical Conditions

Medications



I give permission for my child to attend this field trip.

Parent/Guardian Signature

Date