University Group Study Outbound Trip Permission Form

Student Information

Full Name
Student ID
Course/Program
Year Level
Take Dataila
Trip Details
Trip Destination
Date of Trip
Purpose of Trip
Group Leader Name
Emergency Contact
Contact Name
Relationship
Contact Number

Consent & Declaration

By signing below, I confirm that I have received all pertinent information about the group study trip and I give my permission to participate in the outbound activity. I agree to abide by the university's rules and regulations during the trip.

Student's Signature	
Date	
Date	
Parent/Guardian's Signature (if under 18)	
Date	
Date	