School Trip Parental Permission Form

Student Name
Class/Grade
Teacher/Trip Supervisor
Trip Destination
Trip Destination
Date of Trip
Departure Time
Return Time
Purpose of Trip
Parent/Guardian Contact Information
Parent/Guardian Name
Phone Number
Email Address
Emergency Contact (if different)
Emergency Contact Phone

Medical Information

Allergies / Medical Conditions

Medications Needed	
Additional Notes	
Parent/Guardian Signature	
Date	
Date	