## **Music Concert Excursion Permission Slip**

Student Name:	
Grade/Class:	
Teacher:	
Date of Concert:	
Location:	
Departure Time:	
Return Time:	
I give permission for my chil	d to attend the above music concert excursion.
Emergency Contact Ir	nformation
Name:	
Relationship:	
Phone Number:	
	Parent/Guardian Signature
	Date