

FIELD TRIP PERMISSION FORM

Edison Elementary Schools

34505 Hunter Ave, Westland MI, 48185
Phone: 734-419-2600 • Fax: 734-595-2368

Grade Level/Teacher: _____

Field Trip Date(s): _____

Destination: _____

Cost: _____

Number of Chaperones needed: _____

Reason for Field Trip: How does this apply to your class?

I give permission for my son/daughter to participate in the field trip activity described in this form.

Parent/Guardian Signature

Date

STUDENT NAME: _____

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PARTICIPATING STUDENTS.

Coordinating teacher(s): _____

Field Trip Date(s): _____

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Number of Students: _____

Reason for Field Trip: How does this apply to your class?

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STUDENT NAME: _____

This form must be presented to all teachers whose class(es) may be missed because of a field trip or other activity. It will serve as a permission slip/boarding pass (if transportation is required). Incomplete forms will not be accepted and students will be denied permission to participate in the activity without a completed form.

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