

DAY/ EXTENDED DAY FIELD TRIP PARENT/GUARDIAN PERMISSION FORM

Dear Parent/Guardian:

The _____ at _____ has planned a
(Organization/Student Group) (School)

field trip to _____ on _____. The purpose of the trip
(Destination) (Date)

is to _____.
(Reason for the field trip)

Transportation will be provided by _____ with a departure time of
(means of transportation)

_____ and return time of _____. The cost to the student is _____.
(Time) (Date and Time) (Amount)

IF YOUR CHILD OR THE STUDENT FOR WHOM YOU ARE RESPONSIBLE DOES NOT HAVE PERMANENT AND ADEQUATE HOUSING, IS TEMPORARILY STAYING IN A SHELTER, GROUP HOME, OR WITH FRIENDS/FAMILY DUE TO ECONOMIC HARDSHIP, PLEASE CONTACT HIS/HER PRINCIPAL TO ASK FOR A WAIVER AND A COPY OF THE BROCHURE ENTITLED *HOMELESS CHILDREN AND YOUTH IN BALTIMORE COUNTY PUBLIC SCHOOLS*.

Yours truly,

Sponsoring Teacher

Principal's Approval _____

(Detach and return lower portion to school)

_____ has my permission to attend the field trip to
(Student)

_____ under the supervision of _____.
(Location) (Sponsoring Teacher)

I have fully read this permission slip. I have explained to my child that while participating in the above-described field trip, my child must adhere to the Baltimore County Board of Education's Code of Conduct, Board Policies, and Superintendent's Rules. I fully understand and have explained to my child that failure to follow this Code of Conduct, the Policies and/or Rules may result in disciplinary action.

(Date) (Signature of Parent/Guardian) (Signature of Student)

In case of an emergency while on the trip, please contact me at _____.
If there is medical information pertinent to my child's participation, I will contact the school nurse in order to evaluate, revise, and update information that may already be on file.

THE BOARD OF EDUCATION SHALL NOT BE FINANCIALLY LIABLE FOR LOSSES DUE TO CHANGES OR CANCELLATION OF FIELD TRIPS.