

St. Maria Goretti School
FIELD TRIP INFORMATION AND PERMISSION

DATE _____ DATE OF FIELD TRIP: _____

TEACHER(S) / GRADE LEVEL: _____

WHERE: _____

TIME: _____

LUNCH: At School: _____ Bring a sack from home: _____ Purchase Out: _____

COST TO SCHOOL: Activity: _____ Bus: _____ Food: _____ Total: _____

DRESS CODE: Uniform: _____ Other: _____

EDUCATIONAL PURPOSE: _____

INFORMATION: _____

CLIP AND RETURN
ST. MARIA GORETTI

Return this form by: _____
Date

I am aware and give my permission for my child, _____
Name

to go to _____ on _____ with
Place Date

his/her class.

Parent or Guardian Signature

Yes, I would like to chaperone: _____

Name: _____ Phone: _____

(You will be notified if you are needed to chaperone)

UNDER NO CIRCUMSTANCE ARE SIBLINGS ALLOWED TO ATTEND A FIELD TRIP!!!!!!