

FIELD TRIP PARENTAL PERMISSION FORM

COLBERT COUNTY BOARD OF EDUCATION

Tuscumbia, Alabama

SCHOOL/DEPARTMENT: _____

DATE: _____

TO: Parent(s)/Guardian(s)/Custodian(s)

FROM: Your Child's Teacher/Coach/Sponsor

A school activity has been planned away from the normal school premises. The specific information relative to the activity is listed below:

STUDENT' NAME: _____

PROPOSED SCHOOL ACTIVITY: _____

NAME OF PERSON(S) IN CHARGE: _____

TRIP: _____

TRIP DESTINATION(S): _____

DEPARTURE TIME: _____

EXPECTED TIME OF RETURN: _____

COST TO YOUR CHILD: _____

METHOD OF TRANSPORTATION: School District Bus Commercial Carrier
 Private Vehicle Walking Airplane

In case of an emergency, my child may receive medical treatment at the nearest emergency medical treatment facility (Any emergency medical treatment shall be at the expense of the parent/guardian/custodian.): **Yes** **No**

Provided you approve of your child making the trip based on the information provided above, please check the appropriate space below, sign your name in the space provided, and return this form by your child to the person(s) in charge. Provided you do not wish for your child to make the trip, please check in the appropriate space below and return the form unsigned by your child to the person(s) in charge.

My child can participate in the above named activity: **Yes** **No**

My child is covered by hospitalization/medical insurance: **Yes** **No**

PARENT/GUARDIAN/CUSTODIAN SIGNATURE

DATE

Note: *Children will not be permitted to go on field trips without a signed Field Trip Parental Permission Form on file for each trip or associated series of trips such as football, basketball, etc.*