

PARENTAL PERMISSION FOR FIELD TRIP

Bedford County Board of Education

_____ has my permission to make an off-campus field trip with
Name of Student

_____ to _____

Destination

I understand the purpose of the trip is _____
_____;

that students will depart _____ at
Name of School, etc.)

_____ on _____ and will return at _____
Time Date Time

on _____; that they will travel by _____
Date Vehicle

accompanied by _____ chaperones; and that the personal expense of each student is
Number

Amount

Signature of Parent

Date

