

PARENTAL CONSENT FORM FORM FIELD TRIP

For Office Use Only

Verification of
Insurance _____

DATE: _____

Dear Parent/Guardian:

We would like to request permission for your son/daughter _____

Homeroom _____ to go on a field trip to _____ on (airline/

boat/bus/car) # _____. He/She will be leaving on _____
Date

at _____ (a.m./p.m.) and returning on _____ at _____ (a.m./p.m.)
Date

While there your son/daughter will be staying with _____

_____ at _____ and can

be reached by phone at _____.

Teacher's Signature

Date

DOES THIS STUDENT HAVE SCHOOL ACCIDENT
INSURANCE? _____

IF NOT, UNDER WHAT INSURANCE POLICY IS
THIS STUDENT COVERED IN CASE OF AN
ACCIDENT? _____

PLEASE ATTACH A COPY OF INSURANCE CARD
OR OTHER PROOF OF INSURANCE COVERAGE.

Parent/Guardian Signature