

Baker County School District

Field Trip Permission Form

Dear Parent(s)/Guardian(s):

We are planning a field trip

TO: _____

ON: _____

FROM: _____

DEPARTURE TIME: _____

PROJECTED ARRIVAL TIME BACK TO SCHOOL: _____

METHOD OF TRANSPORTATION

Walking

School Bus

Automobile

Please check appropriate box.

Purpose of Trip:

FEES

\$_____ is requested for _____.

If you would like for your child to attend, please sign below and return this form.

PLEASE NOTE: YOU MUST COMPLETE FORM AND RETURN THIS FORM IN ORDER FOR YOU CHILD TO PARTICPATE.

STUDENT NAME: _____ GRADE: _____

PARENT SIGNATURE: _____ DATE: _____

PARENT CONTACT NUMBER: _____

TEACHER/SPONSOR SIGNATURE: _____

PRINCIPAL SIGNATURE: _____