FIELD TRIP PERMISSION SLIP FORM

JOLIET DIOCESAN SCHOOL SYSTEM

On _____, _____ will be taking
(day, date) (class)
a field trip to _____. The educational benefit of this a
(place)
trip will be _____. We will leave school at _____

and arrive back to school by _____. There will be _____ chaperons per

_____ children.

Transportation will be by _____. The cost of the trip will be $_____.
(bus, foot, parent auto)

If transportation is by parent auto, each child must have his/her own seat belt and not be placed in front of an air bag (per manufacturer's instruction).

Please return the signed permission slip with the money by _____.

Thank you.

I request that _____ take my child _____ on a

field trip to _____.

I hereby release and indemnify St. Petronille School, Glen Ellyn, IL, it's staff, volunteers, and the Joliet Diocese from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.

RELEASE: If emergency treatment is required, and the parents or legal guardian cannot be reached immediately, your signature in the space provided below empowers the school authorities to exercise their own judgment to transport the child to a hospital emergency room.

Date: _____ Parent's Signature _____

I can be reached on the day of the field trip at the following phone # _____.