

For office use only:	
Student Name _____	Paid <input type="checkbox"/>

Hoggetowne Middle School

Field Trip Permission Slip

I give permission for my child, _____, to attend a school trip to _____ at the address of _____ on _____. We will leave the school at _____ and return at _____.

We will travel by: _____ The cost of the trip is: \$_____

A packed lunch is required: Yes / No

In the event of an emergency I may be reached at:

_____ Home _____ Work _____ Cell _____ Other

My child has the following allergies and/or medical condition(s):

I am available to chaperone Yes / No

Parents Name

Parent Signature

Date