***2025-26***

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**Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assistant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***, ***20\_\_\_\_***, ***we will be going on a field trip***

***Day, Month, & Date Year***

***to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Name of Place***  ***Location***

***We will be traveling by \_\_\_\_\_\_\_. We will leave school at \_\_\_\_\_\_\_\_\_ and***

***Bus/Walk Time***

***return at approximately \_\_\_\_\_\_\_\_\_\_ .***

***Time***

***My child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Child’s Name***

**(Please Circle One)**

***YES -*** My child may go

***NO -*** My child may not go  ***X \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Signature of Parent/Guardian***

***The educational purpose of this field trip is:***

Nutritional Awareness Scientific Exploration Bus Safety

Socialization Skills Cultural Awareness Agricultural Experience

Theatrical Experience Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_