



PALOS COMMUNITY CONSOLIDATED SCHOOL DISTRICT 118

Dear Parent or Guardian:

We believe there are many educational values to be gained from a selected, out of school experience. We are planning a field trip, described below to supplement our classroom program. Please indicate whether or not your child has your permission to participate, sign and return this completed form to the school. Thank you.

Description of Field Trip

To: \_\_\_\_\_ Date \_\_\_\_\_

Pupil's Cost \_\_\_\_\_ (Please send the exact amount)

Time of Departure \_\_\_\_\_ Approximate Time of Return \_\_\_\_\_

Means of Transportation: School Bus

Pupils will be accompanied by \_\_\_\_\_  
Teacher Signature

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I **DO**\_\_\_ **DO NOT**\_\_\_ give my permission for \_\_\_\_\_  
to participate in the field trip described above. (Student's Name)

\_\_\_\_\_  
Signature of Parent or Guardian

NOTE: Under no circumstances can a child participate in a field trip unless this signed form is on file in the school. Thank-you.

*Charting the Course for the Future*