

# Aveson Charter School Field Trip Permission Form

Dear Parent or Guardian,  
Your child is going on a field trip. Please read the information at the top of this form, then sign and return the permission slip at the bottom of this form by \_\_\_\_\_.

Field Trip Information:

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

Location: \_\_\_\_\_

Purpose: \_\_\_\_\_

Donation (not required) \_\_\_\_\_

Cash or check payable to: \_\_\_\_\_

Means of Transportation: \_\_\_\_\_

Leave school: \_\_\_\_\_ Arrive back at school: \_\_\_\_\_

Special Instructions (i.e., sack lunch, special clothing etc.):

\_\_\_\_\_  
\_\_\_\_\_

*Save this part of the form for future reference.*

*Cut here*-----*Cut here*

*Sign this part of the form and return it to your child's teacher.*

\_\_\_\_\_ has permission to attend a field trip to  
\_\_\_\_\_ on \_\_\_\_\_ from  
\_\_\_\_\_ to \_\_\_\_\_.

I give my permission for \_\_\_\_\_ to receive emergency medical treatment. Enclosed, please find cash/check in the amount of \_\_\_\_\_ as a donation to cover the cost of the trip.

**Medical Alert:** (Allergies) \_\_\_\_\_ (Medical Conditions) \_\_\_\_\_

In an emergency, please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_