

WEST CHESTER AREA SCHOOL DISTRICT

ADMINISTRATIVE GUIDELINE
APPROVED: August 1, 2015
REVISED:

121AG2 PERMISSION FORM

Parent/Guardian:

The school authorities encourage educational trips under suitable conditions as part of class work. We are glad to have your daughter or son go with the group on the trip named below:

1. Place (Itinerary):

2. Date:	Starting hour:	am	pm
	Est. Return hour:	am	pm

3. Teacher(s) in Charge:

4. Transportation:

5. Cost to Pupil:

6. Name of Pupil:

7. Building:

8. Special Instructions from School:

9. If your student has medical considerations or medical needs, please list here and attach the completed Field Trip Medical Information/Field Trip Medication Administration Form – 121AG6.

Important: All arrangements for any medication that will be necessary on a field trip must be made with the nurse before the day of the trip.

Parent/Guardian Signature: _____

Address:

Phone:

Email:

I am willing to serve as a chaperone on this field trip.