

**KEMPTON NEW CHURCH SCHOOL**

**Permission for School Trip**

*Teachers: Please call your classroom assistants or give them a copy of this sheet.*

**Destination** (*Teachers – Also enter this info in the parent-signature portion below*):

\_\_\_\_\_

**Purpose of Trip:** \_\_\_\_\_

\_\_\_\_\_

**Grade/s:** \_\_\_\_\_

**Date/s:** \_\_\_\_\_

**Time and Place of Departure:** \_\_\_\_\_

**Time and Place of Return:** \_\_\_\_\_

**Cost:** \_\_\_\_\_

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

\_\_\_\_\_

**Chaperones:** \_\_\_\_\_

\_\_\_\_\_

**Special Requirements:** \_\_\_\_\_

\_\_\_\_\_

*Parents keep this portion.*

\* \* \* \* \*

*Return this portion to teacher.*

**Yes**    **No**

**I give my permission for my child/children to attend the trip below.**

**Destination:** \_\_\_\_\_

**Name/s of Child/Children:** \_\_\_\_\_

**Signature of Parent:** \_\_\_\_\_

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

**To the teacher--please remember to bring the following medications for my child:**

\_\_\_\_\_