

Date: _____

Dear Parents/Guardians:

We are planning a field trip to the _____
on _____. We will be leaving school at _____ and will
be returning no later than _____.

Cost: _____ **Spending Money Needed:** _____ **Suggested Amt.** _____

Sack Lunch Required: _____ **Clothing:** _____ **Uniform** _____ **Other** _____

DETAILS

(Please keep top portion for your records)

_____ has my permission to to with grade(s) _____
(student's name)

to _____, on _____
(field trip location) **(date of field trip)**

As a parent or guardian, I release St. Rose School, Parish and Toledo Diocesan Schools, and any associated person or agency from any claims of ordinary negligence, in consideration for the opportunity to participate in this program. Everyone transporting our Parish's youth is required to have his/her own personal, up-to-date insurance, driver's license (a copy of both must be on file in the school office) and to be responsible for the care of our youth.

Parent/Guardian Signature

_____ Yes, I can drive. My car has _____ seatbelts.