

## Anne Arundel County Public Schools FIELD TRIP PERMISSION LETTER

DIRECTIONS: This form is to be completed and presented to the principal with the Field Trip Request

Form and the Field Trip Study G	uide.	= 101-	) 010-
Dear Parents:	Date Submitted $\frac{5/9/2018}{}$		
The <u>Senior Class</u> (Grade or Class)	has been given permissi	on to take a trip to	
<u>Meade Senior High School</u> on (Place)	Wednesday (Day)	, <u>May 23</u> (Date)	
Transportation for this trip will b	e provided by Lonerga	<u>ın's</u> , a	
properly insured carrier. All sen	iors must ride the bus to	and from Meade HS.	There is no cost for this trip.
Please be advised that <b>ALL</b> field the Superintendent of Schools or in the best interests of student financial or other commitments be responsible for any losses aris	the Superintendent's descriptions of the Superintendent's description of the Superintendent of	esignee, when in their ses, parents and stud	sole discretion, cancellation is ents bear the risk of loss for
The group will be accompanied hadults to the number of students by 1:30 pm. Please sign and retu to go on this trip.	s taking the trip. The st	tudents will leave the	school at 10:30 am and return
	Sincerely,	· · · · · · · · · · · · · · · · · · ·	
•			
	Teacher	X	
APPROVED: W	<u>CSP</u>		
Principal	School		
	PERMISSIO	ON SLIP	
Please complete and return to t	<u>he classroom teacher i</u>	within five school day	' <u>S.</u>
(Name)	ssion to make the trip to	(Place)	
on I (we) believ (Date)	e that the <u>necessary pre</u>	ecautions and plans for	<u>C</u>
the care and supervision of my cl	aild during this trip will	<u>be taken.</u> I understan	d I may be responsible for
payment in the event of cancellat	ion or postponement of	f the field trip.	
Phone number in case of emerge	ncy Parent/Gu	ardian Signature	,

Please attach information on pertinent physical or medical concerns that the staff should be aware of (i.e., allergic to bee stings, etc.).