

Parent/Guardian Signature

## Consent Form - All Field Trips

Teacher Lead, Parent/Guardian

Teacher Leader Section	
This is to advise thatSchool intends to involve your son/da off-campus activity. The particulars of the field trip are as follows:	ughter in an
Purpose:	
Destination:	
Arranged Supervision:	
Date:	
Transportation Plans:	
Risks or Dangers:	
Costs (if any):	
For additional information, please phone the school at 403  If you permit your son/daughter to participate in this activity, please sign and tear-off the por and return it to the school.	tion below
und return in to the school.	
Parent/Guardian Section	
Please note that your child will NOT be allowed to participate in this field trip unless this form and returned to the school prior to the field trip taking place.	is signed
FIELD TRIP CONSENT FORM	
Having understood and signed the Annual Field Trip Authorization – Emergency Medical Inform FT 001 and having read and understood the particulars of this Consent Form – All Field Trips F consent to and give permission for my child to participate.	
Name: Grade:	
Destination: Date of Field Trip:	

Date