**PERMISSION FOR FIELD TRIP**

**[Name Of The School]**  
**[Address]**  
**[Contact Information]**

**Please complete both top and bottom of form**

|  |  |
| --- | --- |
| Student’s Name | [Name] |
| Grade | [Grade] |
| Teacher’s Name | [Name] |

**Participation in the following activities:**

Museum

National Park

Nature Hike

|  |  |
| --- | --- |
| Departing School on | [Time] |
| Returning to School on | [Time] |
| Method of Transportation | [Type] |

I hereby release **[Name Of The School]** from all liability for any injuries sustained by my son/daughter including specifically all claims, demands, negligence, actions, and judgments sustained by my son/daughter. I acknowledge that such activities are conducted for students to have a wholesome educational experience.