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|  | **FIELD TRIPSIGNING UP SHEET** |
|  | TTILE | DATE | TIME |  |
|  | <Title of Field Trip> | mm/dd/yyyy | hh:mm AM |  |
|  | DESTINATION |  |
|  | <Destination> |  |
|  | PURPOSE |  |
|  | <Purpose of field trip> |  |
|  | SPONSORED BY | CONTACT PERSON |  |
|  | <Sponsored By> | <Contact Person> |  |
|  | CONTACT DETAILS | EMAIL ADDRESS |  |
|  | <Contact Details> | <Email Address> |  |
|  | *NOTE: Ensure you have the permission slip completed by your parents or guardian before signing up.* |  |
|  | **Name** | **Age** | **Contact Number** | **Email Address** | **Permission Signed By** |  |
|  | John Smith | 14 | 1 47-8335-XXXX | johnabcd@gmail.com | Linda Smith |  |
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