
**PARENTAL PERMISSION FOR FIELD TRIP
ONEIDA BOARD OF EDUCATION**

_____ has my permission to make
(Name of Student)

an off-campus field trip with _____ to
(Group)

_____.
(Destination)

Students will depart _____
(Name of School)

at _____ on _____ and will return at _____
(Time) (Date) (Time)

on _____ ; they will travel by _____
(Date) (Vehicle)

accompanied by _____ chaperones; and the personal expense of each
(Number)

student is _____.
(Amount)

I further give my permission for proper medical attention to be received, if needed.

Signature of Parent / Guardian

Date