

CHRIST CHURCH SCHOOL FIELD TRIP PERMISSION SLIP

Activity: _____

Date: _____ Time: _____

Teacher: _____

Please return this form by: _____

Please keep this top portion for your reference

Student's Name: _____

Daytime Emergency Contact phone number: _____

Christ Church School will exercise responsibility in assuring a safe time for all students. Students will be chaperoned by responsible adults who will take all necessary precautions to protect students from harm or injury. I understand that my signature on this permission slip means that I will not hold the school or its sponsors liable in any way of accidents, injuries or illness on any school sponsored extra curricular activity or field trip.

If your child needs a car seat or booster seat, you MUST bring one to the school on the day of the field trip.

I hereby give my child _____ permission to
participate in the field trip scheduled for _____.

Parent's Signature: _____.

Date: _____.

All drivers must have valid drivers license and proof of insurance on file with the school office.

Please return this lower portion to your child's teacher.