

Field Trip Form

Teacher
Name: _____

Date: _____

Class
Name: _____

FIELD TRIP INFORMATION			
<i>Date(s) of Trip:</i>		<i>Time Leaving: Time Returning:</i>	
<i>Destination:</i>			
<i>Cost of Trip:</i>		<i>How is it funded?:</i>	
<i>Number of Students in Class:</i>		<i>Number of Students Attending Trip?</i>	

DESCRIBE ARRANGEMENTS FOR THOSE NOT ATTENDING:

TRANSPORTATION ARRANGEMENTS

Students are required to ride to and from your destination on the transportation provided by the district

Chaperones _____

Approved

Not Approved

Principal

Date _____

REMINDER: Students are required to have permission slips, signed and turned in to the instructor, prior to the field trip.