

Field Trip Permission Form

Your child's class will be attending a field trip to: The Henry Ford Museum

<i>Date</i>	8/8/14	<i>Time</i>	9am-2pm
<i>Location</i>	Dearborn, MI		
<i>Cost</i>	\$10		
<i>Transportation</i>	School district bus		
<i>Notes</i>	Parent Volunteers Needed, email Ms. Kleinschmidt if you can help		

Please return this permission slip by: 8/1/14

I give permission for my child _____ in room 114
to attend the field trip to The Henry Ford Museum on 8/8/14
from 9am to 2pm

Enclosed is \$ 10 to cover the cost of the trip. (Exact cash or check made payable to school.)

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

Name _____ Phone _____

Parent/Guardian Signature _____ Date _____