

**HAMPTON TOWNSHIP SCHOOL DISTRICT
Marian Emmons McKeown School**

FIELD TRIP PERMISSION FORM

Dear Parents:

Your child and his/her class or program will be participating in an educational field trip in the near future. This trip is an extension of our school curriculum or program. We request your signed approval below.

Thank you for your support of your child's program at McKeown School.

Sincerely yours,

E. C. Burns
Chief School Administrator

Child's Name _____ Class/Program _____

Destination of Trip _____

Date of Trip _____ Alternate Date _____

Time of Departure from School _____ Return Time to School _____

Sponsoring Teacher/Advisor _____

Cost per Student (make check payable to "McKeown Student Activities Fund") _____

An admission fee of \$ _____ is necessary. Please make your check payable to "McKeown Student Activities Fund." If you cannot afford such or feel unable to pay, please phone our school principal or your child's classroom teacher, and our Board of Education will be responsible.

IMPORTANT NOTES:

1. **If your child needs medication administered on such a trip, we ask that the parent attend with the child, or schedule other contingencies with the approval of our school nurse, principal and teacher.**
 2. If the return time of the trip is scheduled after 3 p.m., you are to provide prompt pick-up for your child.
 3. Please be reminded that school rules apply on field trips and students are expected to behave appropriately as they represent their family and the school district.
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Child's Name _____ Unit/Teacher _____

_____ I've read the above information and notification. I give my permission for my child to participate.

_____ I do not wish my child to attend. I understand that an alternate educational plan will be provided in school.

_____ I understand that school rules apply on field trips and I agree to accept responsibility for my behavior.

_____ (student's signature)

_____ (date)

Parent/Guardian Signature

Date

On the day of the trip, I can be reached at the following number _____