

Japhet School
 839 S. Crooks, Clawson, MI 48017
 248-585-9150

Field Trip Permission Slip

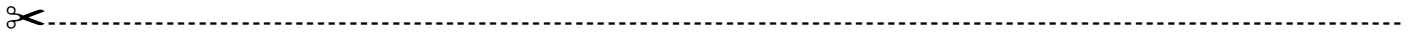
Child's Name: _____

Field Trip:	
Purpose of Field Trip:	

Date of Field Trip:		Time Departing & Returning:	
Cost per Child:		Permission Slip Due By:	

Cost Includes:	
Students Should Bring/Wear:	

(please fill out & return bottom portion with payment to your child's teacher)



My child, _____, has my permission to accompany

Child's First & Last Name

Japhet School on a field trip to _____

Field Trip Destination

on _____ from _____ to approximately _____.

Date

Time Leaving Japhet

Time Returning

Transportation will be by private car. The classroom teacher assigns drivers who volunteer. Students with emergency/rescue medications will ride with their own parent, or with a teacher if a parent does not attend. Chaperones driving other students must provide a copy of their proof of current auto insurance for Japhet School to keep on file. PLEASE CHOOSE ONE:

1. I am willing to drive my own and other children. I can fit _____ TOTAL in the back seats.
 (An Upper Class student may ride in the front seat.)
2. My child needs to ride with another adult.
3. PRESCHOOL/KDG ONLY: I prefer to drive only my child. I will come to Japhet first (or) meet you there.

Total amount due/enclosed: \$_____ [] cash [] check [] charge my credit card on file
(a current Credit Card Authorization Form must be on file with the school)

Parent's Signature _____ **Date** _____