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**PARENT/GUARDIAN FIELD TRIP PERMISSION FORM  
(no chaperones needed)**

I hereby give my permission for

*Student Name*

to participate in a field trip to

on  from  to

Staff contact:  Phone Number:  Due by:

Cost of the field trip:

Payment Type: Check Infinite Campus Cash



Field trip lunch: School lunch Bag lunch from home

If the student has any medical or physical condition, medication information, or allergies which could interfere with the student’s safety, please provide information below:

Signing below indicates you give permission for your student to participate in this field trip and that you understand this activity is an extension of the school’s educational program. Student conduct is to be in accordance with the school’s rules.

*Signature of parent/guardian Date*

*Printed name of parent/guardian Phone (Reachable During Field Trip)*



I would like to make a donation to the JPS Scholarship fund in order to support other students whose families cannot afford to pay for the trip and have included it with this form.