

Japhet School
31201 Dorchester
Madison Heights, MI 48071
(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 _____

Student should bring / wear _____

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



Our child _____ has our permission to accompany
Child's Name
the school on a field trip to _____
Field Trip Destination
on _____ from _____ to approximately _____.
Date Time Leaving Time Returning

Transportation will be by private car.

If field trip drivers are needed, would you be able to drive? YES NO

If yes, how many children would fit in your car? _____

Check or cash is attached? YES NO

Parent's Signature _____ **Date** _____