## Parental Permission Slip

| Type of Trip/Destination:                                   |
|---|
| Date/Dates of Trips:  |
| Time of Departure:  |
| Expected Time of Return:                                    |
| Name of Class/Club Involved:                                |
| Name of Supervisor:   |
| •••••••   |
| Name of Student   |
| Yes - my child will attend the function described above.    |
| No - my child will not attend the function described above. |
| Parent's Signature  |
| Comments:   |