

Aquarium Visit Parental Permission Slip

Dear Parent/Guardian,

Our class is planning an educational visit to the local aquarium. Please complete and return this permission slip to confirm your child's participation.

Trip Details

Date of Trip: _____

Location: _____

Departure Time: _____

Return Time: _____

Cost: _____

Additional Notes: _____

Student Information

Student Name: _____

Grade: _____

Parent/Guardian Name: _____

Emergency Contact Number: _____

Health & Allergies

Please list any allergies, medical conditions, or special requirements:

Permission

I give permission for my child to attend the aquarium visit. I do not give permission for my child to attend.

Parent/Guardian Signature

Signature:

Date: