

Permission Form for Student Travel with School

Student Information

Student Full Name

Date of Birth

Grade/Class

Trip Details

Event/Trip Name

Destination

Dates of Trip

Parent/Guardian Information

Parent/Guardian Full Name

Contact Number

Emergency Contact (if different)

Medical & Special Instructions

Relevant Medical Conditions/Allergies

Special Instructions

Permission Statement

I hereby give permission for my child named above to participate in the described school trip. I understand all precautions will be taken for the safety of my child. I confirm that the medical information provided is accurate. I release the school and its representatives from liability in case of accident, illness, or other unforeseen event.

Parent/Guardian Signature

Date
