Spokane Valley Adventist School Field Trip Permission Form

Dear Parent or Guardian,

Your child is going on a field trip. F	Please read the information at the top of this form, then sign	and
return the permission slip at the bo	ottom of this form by(Please return to teacher by the above date)	·
Field Trip Information:		
Teacher:	Date:	
Location:		
Purpose:		
Means of Transportation: Parent v	rolunteers	
Leave school:	Arrive back at school:	
Special Instructions:		
Save	e this part of the form for future reference.	
Cut here	Cut here Cut here Cut here	
Sign this pa	rt of the form and return it to your child's teacher.	
-	cane Valley Adventist School eld Trip Permission Form	
Teacher:		
	has permission to attend a field trip to	
(Student's Name)		
	on	from
(Location)	(Date)	
(Time Leaving SVAS)	to (Time Returning to SVAS)	•
I am available to help with t	ransportation for this event. I can carry students.	
I can drive but I can only tal		
_	ing in the front seat if necessary.	
Parent/Guardian Signature:	Date:	