

Self-Commuting Field Trip Permission Form

Field Trip Destination/Date:

Advisor/Club/Trip Objective:

Destination Report Time:

Destination End Time:

***Parents/Guardians – Please check one option and complete the information requested. Please sign and date the form and return it to the advisor/sponsor prior to the date of the field trip.**

_____ 1. I, _____, will be transporting my son/daughter, _____, to
(Parent/Guardian Name) **(Student Name)**
_____ on _____ for the field trip listed above.
(Destination) **(Trip Date)**

_____ 2. I, _____, allow my son/daughter, _____, to drive to
(Parent/Guardian Name) **(Student Name)**
_____ on _____ for the field trip listed above.
(Destination) **(Trip Date)**

- For Option 2 – please list the names of students that have requested to ride as passengers in the car driven by your son/daughter (PARENTAL PERMISSION MUST BE OBTAINED FROM EACH PASSENGER):

_____ 3. I, _____, allow my son/daughter, _____, to ride as a
(Parent/Guardian Name) **(Student Name)**
Passenger in the car of, _____ to _____ on _____ for
(Student Name) **(Destination)** **(Trip Date)**
the field trip listed above.

_____ 4. I, _____, allow my son/daughter, _____, to walk from
(Parent/Guardian Name) **(Student Name)**
Emmaus High School to _____ on _____ for the field trip listed above.
(Destination) **(Trip Date)**

Parent/Guardian Signature _____

Date _____

Principal Approval _____

Date _____