



3801 Crescent Circle
South Bend, IN 46628
Tel. (574) 299-9800
Fax. (574) 288-6125
www.CareerAcademySB.com

Parent Permission Form for Field Trip Participation

Dear Parent and/or Guardians:

Your student is eligible to participate in a field trip requiring transportation to a location away from the Career Academy campus. The trip will be supervised by employees of the Career Academy.

Details:

Destination	
Designated Supervisory of Activity	
Date and Time of Departure	
Date and Time of Return	
Method of Transportation	
Cost per Student	
Additional Items Needed	

If you would like your child to participate in this event, please complete, sign and return the bottom portion of this slip. Failure of the slip returned by the due date will result in your student not being able to participate.

..... Detach and retain the top half of permission slip.

I, _____, the parent/guardian, hereby release Career Academy and its designees to allow my student, _____, to participate in the field trip to _____ on _____.

Contact Information:

Emergency Contact Information:

Name: _____

Name: _____

Best Daytime Phone Number: _____

Relation to Student: _____

Best Daytime Phone Number: _____

Signature

Date