

NRHEG Public School ISD #2168  
**Field Trip Parental Consent Form**

Rev. 2-2-2024



**Trip Details:**

- Destination: \_\_\_\_\_
- Dates: \_\_\_\_\_
- Accommodations: \_\_\_\_\_
- Activities: \_\_\_\_\_

**Cost:**

The estimated cost for this trip is \$\_\_\_\_\_. This includes transportation, accommodation, meals, and any planned activities. Please make payments by \_\_\_\_\_ to ensure smooth planning and organization.

**Permission Slip:**

I, the undersigned, give permission for my child, \_\_\_\_\_, to participate in the field trip to \_\_\_\_\_ organized by \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_.

I understand that my child will be under the supervision of the school staff and that all reasonable precautions will be taken to ensure their safety.

In case of emergency, I can be reached at \_\_\_\_\_. Additionally, I authorize the school staff to seek medical attention for my child if deemed necessary.

**Medical Information:**

Please provide any relevant medical information or special instructions regarding your child's health or dietary needs.

- Medical Conditions: \_\_\_\_\_
- Allergies: \_\_\_\_\_
- Medications: \_\_\_\_\_

**Acknowledgment:**

I have read and understand the details of the trip, including the itinerary, cost, and safety measures in place. I agree to ensure that my child adheres to the rules and guidelines set by the school for the duration of the trip.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*This is a passive consent form. Please let us know if your child **will not** be attending the field trip.