



**PARENT/GUARDIAN FIELD TRIP PERMISSION FORM
(with chaperones)**

I hereby give my permission for _____
Student Name

to participate in a field trip to

on _____ from _____ to _____

Staff contact: _____ Phone Number: _____ Due by: _____

Cost of the field trip: _____

Payment Type: ☐ Check ☐ Infinite Campus ☐ Cash

Field trip lunch: ☐ School lunch ☐ Bag lunch from home

If the student has any medical or physical condition, medication information, or allergies which could interfere with the student's safety, please provide information below:

Signing below indicates you give permission for your student to participate in this field trip and that you understand this activity is an extension of the school's educational program. Student conduct is to be in accordance with the school's rules.

Signature of parent/guardian

Date

Printed name of parent/guardian

Phone (Reachable During Field Trip)

☐ If chaperones are needed for this field trip I would like to volunteer. **I agree to follow the JPS Volunteer Guidelines and pay \$11.00 for the District to conduct a BCA criminal background check through Trusted Employees.** I will contact the office to discuss options if this fee will be a hardship for our family.

Please contact me at: _____
Phone number or email

☐ If I am a chaperone, I would like to drive my student home from the trip. I understand I can only bring my student home, and am responsible for the safe transportation back from the trip. I will not hold the District liable for any event that occurs while transporting my student home.

☐ I would like to make a donation to the JPS Scholarship fund in order to support other students whose families cannot afford to pay for the trip and have included it with this form.