

## **FIELD TRIP PERMISSION FORM**

**Your child's class will be attending a field trip to:**

**LOCATION:** Detroit Zoo

**DATE:** May 5, 2025

**TIME:** Leave school at 9:30 and Return at 2:00 (leave the zoo at 1:15)

**COST:** \$14.00 (per student and chaperone)

**METHOD OF TRANSPORTATION:** Bus

**NOTES:** Chaperones will need to be cleared by the district to attend. This process takes time so please fill out the form in the office as soon as possible. Chaperones will drive their own cars and meet us at the Zoo

PLEASE RETURN THIS PERMISSION SLIP BY: **Monday, April 28th 2025** (in order to make our payment and turn in a count to the zoo)

Your written permission and waiver of liability are required for transportation of your son/daughter to a school-sponsored activity as detailed above.

I give permission for my child, \_\_\_\_\_, to attend the field trip  
to \_\_\_\_\_, on \_\_\_\_\_ from  
\_\_\_\_\_ to \_\_\_\_\_.

Enclosed is \$ \_\_\_\_\_ to cover the cost of the trip. (CASH ONLY.)

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

_____, (Print Full Name)	_____, (Phone Number)
_____ (Parent/Guardian Signature)	_____ (Date)

Chaperones will be needed.

( ) I am able to chaperone and I understand that I must have district clearance.

Name of Chaperone: \_\_\_\_\_ Relation to Child: \_\_\_\_\_

*I hereby release the Dearborn Public Schools, its employees and agents from any and all claims for liability which might arise from or in connection with this field trip.*