

School District of the City of Royal Oak

PERMISSION SLIP FOR FIELD TRIP

Dear Parent or Guardian:

Plans are being made for your son or daughter to leave the school on a field trip to: Royal Oak Public Library

at 12:30 p.m. on 11/24/2015, and returning at approximately 2:45 p.m. on 11/24/2015

Curriculum Objective: Reading is Fundamental; USE of public library.

Transportation will be:

- In a Royal Oak School District bus
- In a private car driven by Volunteer Drivers (See note on reverse side)
- In a chartered bus
- Walking

Food Arrangements:

- None
- Bring lunch
- Items may be purchased

Costs: Voluntary, as sponsored by PTA or other volunteer group

<input checked="" type="checkbox"/>	Admission	\$ _____
<input checked="" type="checkbox"/>	Transportation	\$ _____
<input checked="" type="checkbox"/>	Miscellaneous	\$ _____

On the tear-off section, please indicate your wishes regarding your child's participation in this activity.

Ry P. K.
(Teacher in Charge)
11/24/2015
(Date)

(Please return this portion to the school.)

11/20/2015
(Date of Reply)

- I give my permission for _____ to attend the field trip to Royal Oak Public Library on 11/24/2015 traveling by private car.
- I do not give my permission.

When transportation is by private car, the number of passengers will be limited to the number of operable seat belts and all occupants will be required to wear seat belts.

(Signature - Parent or Guardian)

VOLUNTEER DRIVER INFORMATION

Please sign and return to the school by November 20, 2015
(Date)

Thank you for volunteering as a driver for a school sponsored field trip, scheduled as follows:

Place Royal Oak Public Library

Date November 24, 2015 From 12:30 p.m. To 2:30 p.m.
(Time) (Time)

/s/ Knapp
(Teacher in Charge)

Name of volunteer driver _____

Address _____ Telephone _____

I acknowledge that:

I have a valid driver's license, Number _____

Expiration Date _____ I am over 21 _____

My vehicle is covered by liability insurance (including coverage of passengers).

Company _____

Policy No. _____ Expiration Date _____

My vehicle is in safe operating condition.

My car is equipped with seat belts and I will require all occupants to use them.

I have _____ seat belts.

I acknowledge that the number of passengers carried in my vehicle will not exceed the number of usable seat belts.

Make _____ Model _____ Year _____

I understand that smoking is prohibited on student field trips.

(Signature, Volunteer Driver)

PRINCIPAL'S RECORD

FOR OFFICE USE ONLY:

Filed in school office: _____

/s/ _____
(Principal)

Note: This form must be filed in the principal's office at least 48 hours before the scheduled trip.
No Smoking while transporting passengers, please.