

ALPHARETTA HIGH SCHOOL  
Field Trip Permit

Date \_\_\_\_\_

Name \_\_\_\_\_ Homeroom \_\_\_\_\_

Field Trip Destination \_\_\_\_\_

With \_\_\_\_\_ On \_\_\_\_\_

The group is traveling via \_\_\_\_\_

A voluntary donation of \$ \_\_\_\_\_ would be appreciated to help defray the cost of our trip. All students who are willing to participate will be given the opportunity to do so, regardless of receipt of payment. We feel that all students will benefit from this activity; however, attendance is not required and in no way affects the student's instruction or evaluation. Please complete the bottom of this form and return it no later than \_\_\_\_\_

Subject Teacher's Signature	Do Not Recommend Student Participate	Do Recommend Student Participate
1 <sup>st</sup> _____	_____	_____
2 <sup>nd</sup> _____	_____	_____
3 <sup>rd</sup> _____	_____	_____
4 <sup>th</sup> _____	_____	_____
5 <sup>th</sup> _____	_____	_____
6 <sup>th</sup> _____	_____	_____
7 <sup>th</sup> _____	_____	_____

Student is responsible for assignments and making up work missed.

Please Check One:

\_\_\_\_\_ I give permission for my child \_\_\_\_\_ to accompany his/her class on the above trip. Voluntary donation is enclosed.

\_\_\_\_\_ I give permission for my child \_\_\_\_\_ to accompany his/her class on the above trip. No donation is enclosed.

\_\_\_\_\_ I do not give permission for my child \_\_\_\_\_ to accompany his/her class on the above trip. I understand he/she will be given school work to complete and placed in another teacher's room until the class returns from the trip.

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

\_\_\_\_\_  
Date