

**Immaculate Conception Elementary School  
Field Trip Permission Form**

I/We, *Parent(s)/Guardian(s)* ▶ \_\_\_\_\_, request that  
Immaculate Conception School allow my child,

*(Student's name)* ▶ \_\_\_\_\_, to participate in the field trip to

*(location of event)* ▶ \_\_\_\_\_ with

his/her \_\_\_\_\_ grade class on \_\_\_\_\_, 20\_\_\_\_, departing at

*(time)* ▶ \_\_\_\_\_ and returning at *(time)* ▶ \_\_\_\_\_.

Special conditions for this trip are: \_\_\_\_\_

\_\_\_\_\_

Teacher(s) that will accompany the students: \_\_\_\_\_

\_\_\_\_\_

The educational purpose of this trip is: \_\_\_\_\_

\_\_\_\_\_

Type of Transportation: \*Bus \_\_\_\_\_ \*\*\*Private Vehicle \_\_\_\_\_

\*(If the bus is canceled/not available, private vehicles will be used.)

\*\*\*I/We understand that volunteer drivers who have completed and returned the  
Volunteer Driver Agreement will provide transportation and that no one under the age of 21  
will be allowed to serve as a driver.

I/We hereby release and hold Immaculate Conception School and the Diocese of  
Springfield Cape Girardeau harmless as well as any and all of its employees and  
volunteers from any and all liability for any and all harm arising to my/our son/daughter as  
a result of this trip.

*Both Parent/Guardian Signatures: (If available)* \_\_\_\_\_

\_\_\_\_\_ Today's Date: \_\_\_\_\_

**Phone #s where parents can be reached during event:** \_\_\_\_\_ or \_\_\_\_\_

\_\_\_\_\_  
*(Teacher's signature) (date)*

\_\_\_\_\_  
*(Principal's Signature) (date)*