Lapeer County Ed-Tech Center
PARENTAL FIELD TRIP INFORMATION

Reason for Trip _____
(i.e. regional competition, state, etc.)
Trip to _____
(Place where held and city)
Date(s) of Trip _____

Address/Contact Phone _____

Depart from Center @ _____ **a.m.** **Return to Center @** _____ **a.m.**
@ _____ **p.m.** **@** _____ **p.m.**

Transportation ☐ **School Bus** ☐ **Instructor's Vehicle**
☐ **Other (specify)** _____

Special Information to Parents _____

_____

_____

Lapeer County Ed-Tech Center
Student Permission Slip

I give my permission for _____ **to accompany the instructor**
(Student's Name)

and/or paraprofessional on the above described field trip.

_____
_____
Date **Signature of Parent/Guardian**

Parent(s) Contact Information

Name_____

Home _____**Work** _____

Please keep the top half for your information and return the bottom half to the instructor at least two days before the field trip. Thank you.