FIELD TRIP PERMISSION SLIP & RELEASE OF LIABILITY

I/We the parents/legal guar	dians of:	
Student: Last Name	(please print)	First Name
request that our student be will take place away from volunteers. All of the rules	e allowed to participate in the the school site and will be su and regulations contained in the	field trip described below. This activity apervised by employees of LCS and/or e Student-Parent Handbook are in effect. ated consequences and, if necessary, will
	Field Trip Informat	ion
Activity: Live performance	of The Diary of Anne Frank (8	th graders)
Field Trip Destination: Park	x Square Theatre, St. Paul	
Cost of Field Trip: No cost for school provided sack lunc Advisor in Charge: Mrs. Ch	h.	er bring a sack lunch or sign up for a
Select 1	March 16, 2018 n school at 7:30 am and retur ring a sack lunch from home	n at approximately 3:15 pm.
•	e having a school provided sac	ck lunch
	ncy, please get the necessary n	nedical attention and contact me at the
If unable to reach me at this	_	
at	(Em	ergency Contact Person)
I/We give our student pe harmless, the school and its		activity. We hereby release, and hold
Signature of Parent(s)/Lega	ll Guardian(s)	Date