



**Gibraltar Area Schools**  
**Daily Field Trip – Parental Permission Form**  
**Grades PK-12**

Field Trip to:

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Group Taking Trip:

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Date(s) of Trip:

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Time Leaving and Returning:

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Teacher(s) in Charge of Trip:

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***I give my son/daughter permission to attend this field trip.***

Student Name (please print):

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Parent / Guardian Name (please print):

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Parent / Guardian Signature:

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Date Signed:

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Emergency Phone Number for this Date:

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