

# FIELD TRIP PERMISSION SLIP



## *Hilltop School*

767 Broadway  
Haverhill, MA 01832  
978-373-6663

**Date:** \_\_\_\_\_

\_\_\_\_\_ **CLASS IS GOING ON A FIELD TRIP TO:**  
\_\_\_\_\_.

On: \_\_\_\_\_ We will be leaving promptly \_\_\_\_\_ am and return by approx. \_\_\_\_\_ am.

Cost: \$ \_\_\_\_\_ per child and

We will be needing chaperones to make this field trip possible.  
We ask that all chaperones, please park their vehicle in the rear parking lot, behind the school.

Cost per chaperone: \$ \_\_\_\_\_.

\_\_\_\_\_ I am able to chaperone

\_\_\_\_\_ I am unable to chaperone

To insure that you will be able to give your full attention to your responsibilities as a chaperone, we request that siblings not attend school field trips.

I give \_\_\_\_\_ permission to attend this field trip.  
CHILD'S NAME

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
PARENT'S SIGNATURE