



# North Livingston Elementary School

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## Field Trip Permission Form

Grade/Class:

Date of Field Trip:

Method of transportation:

Destination:

Cost Per Child:

Leave school at:      and return by:

Connection to Core Content/Standards:

Field Trip Approved by \_\_\_\_\_, Principal



Please sign and return this portion to give your child permission to go on the field trip.  
Keep the top portion to remind you of the date and destination of the trip.

I give my child, \_\_\_\_\_, permission to attend the  
field trip on \_\_\_\_\_ with their class and grant permission  
for any medical treatment to be administered if necessary.

Signature of Parent/Guardian \_\_\_\_\_