



Field Trip Permission Slip

Date: _____

I give permission for _____ (tutor's name) to take
_____ (child's name) on a field trip to _____
_____ (location) on _____ (date).

He/she will be picked up at _____ (time/place) and dropped off at
_____.

I understand that this transportation arrangement is not part of the regularly scheduled tutoring program, that my child's tutor has completed all aspects of the LSMP child protection policy, and that LSMP is not responsible for injuries that may occur to your child during this outing. Your signature below gives your child's tutor permission to accompany him/her on this off-site activity only. Further off-site meetings must be cleared with your signature.

If you have any further questions, please call the Lafayette School Mentoring Project at (510) 444-7285

Parent/ Guardian Signature Phone Number

In case of an emergency please contact: _____
(name) (phone number)

Allergies or dietary restrictions: _____