



Your child will be attending a field trip to: Pelicans Game

Date:	February 4, 2020	Time:	4:15 p.m. to 8:15 p.m.
Location:	Smoothie King center		
Cost:	No Cost		
Transportation:	Provided between school and stadium		
Notes:	Includes cost of admission, sack meal, transportation		

Please return this permission slip by: Monday, February 3, 2020

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I give permission for my child \_\_\_\_\_  
to attend the field trip to \_\_\_\_\_ on \_\_\_\_\_  
from \_\_\_\_\_ to \_\_\_\_\_.  
Enclosed is \$ \_\_\_\_\_ (Exact cash or check made payable to school.)

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_