



Spokane County Head Start/ECEAP/EHS
FIELD TRIP PERMISSION (GROUP)

Room _____ is going to _____

or (in case of bad weather) _____

Date _____ Departure time _____ Return time _____

Mode of transportation: Walking Public bus School bus

I GIVE MY CHILD PERMISSION TO PARTICIPATE ON THIS FIELD TRIP

	Parent/Guardian Signature	Child's Name
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