Our center is planning a field trip!

Location Nan	ne:					Date:		
Address:						·		
Phone Numb	er:							
Cost:				Chaperones Needed:			Yes	No
Approximate Times: Departing center at:				AM PM	Returnir	ng to center a	ıt:	AN PN
Transportatio	Contracted B	JS*	Driver:	Center Staff	Bus Com	Bus Company Staf		
*Contracted	Bus Company N	ame:			l			
*Bus Compar	ny Phone Numb	er:						
On	the day of the	trip, center	staff can be r	each	ed at the	phone numb	er below:	
Other Trip Informa	ation:							
Please sign	n below attestin	g that you p	permit your ch	nild to	attend t	he field trip d	lescribe at	ove:
3		Name of Child:			Signature of Parent or Guardian:			
1.								
2.								
3.								
4.								
5.								
6. 7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								