## **Field Trip Permission Form**

Baptist Children's M	or my child to attend th linistry on	(Data)	·
The field trip is:		(Date)	
This trip is sponsored I give my permission	l by for my child to ride wit	h leaders on this trip	of Trinity Baptist. and return to church.
Allergies		Restrictions	
nsurance Company		Policy Number	
Medical Doctor		Phone Number	
Emergency Contact Person	phone#	Cell#	Relationship
<b>k</b>		Phone #	Cell #
(Parent's Signature)			
Fie	ld Trip Peri	mission Fo	
Fie Child's NameYes, I give permission f	ld Trip Peri	mission Fo	orm
Fie Child's Name Yes, I give permission to Baptist Children's M	ld Trip Peri	e following field trip	orm with Trinity
Fie Child's Name Yes, I give permission f Baptist Children's M The field trip is:	Id Trip Peri	e following field trip	orm with Trinity
Fie  Child's Name  Yes, I give permission to Baptist Children's Moreover The field trip is:  This trip is sponsored I give my permission	Id Trip Period of the American Sor my child to attend the Inistry on	e following field trip  (Date)	with Trinity
Fie Child's Name Yes, I give permission f Baptist Children's M The field trip is:	or my child to attend the linistry on	e following field trip  (Date)  h leaders on this trip  Restrictions	with Trinity  of Trinity Baptist. and return to church.
Fie  Child's Name  Yes, I give permission to Baptist Children's Moreover The field trip is:  This trip is sponsored I give my permission to Sallergies	or my child to attend the linistry on	e following field trip  (Date)  h leaders on this trip  Restrictions  Policy Number	with Trinity  of Trinity Baptist. and return to church.
Fie  Child's Name  Yes, I give permission for Baptist Children's Moreon The field trip is:  This trip is sponsored I give my permission  Allergies  Insurance Company	or my child to attend the linistry on	e following field trip  (Date)  h leaders on this trip  Restrictions  Policy Number  Phone Number	with Trinity  of Trinity Baptist. and return to church.