

CENTRAL BUCKS SCHOOL DISTRICT
Permission Slip for Secondary School Sponsored Field Trip

School: _____ :

Student Name (print): _____ has my permission to

go to (destination): _____

on (date) _____ from (time) _____ to (time) _____

Special Instructions: _____

I understand that transportation will be by (bus, train, foot, car, etc.) _____
and that the School District does not provide insurance protection for personal car usage or being a passenger in a car for a