



Department of Catholic Schools
Archdiocese of San Antonio
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Archdiocese of San Antonio Field Trip Form

TO WHOM IT MAY CONCERN:

I hereby ask permission for my son/daughter _____
(Name)

to attend _____
(Description of Place/Activity)

On: _____ . Time leaving: _____ Time returning: _____

Purpose of field trip: _____

Student will need: _____

I do not hold anyone connected with this activity responsible if any misfortune should occur. I understand and support the fact that my son/daughter must comply with the directions given by the school to the group involved in this activity.

In order for my child to go on the field trip, he/she must have all assignments up to date and have acceptable behavior prior to the field trip.

Transportation by _____ Signed _____
(Parent/Guardian)

Teacher _____ Date _____

Name of school _____

Principal _____

EMERGENCY CONTACT: