

ASCENSION SCHOOL
601 Van Buren St.
Oak Park, Illinois 60304
708-386-7282

FIELD TRIP PERMISSION FORM

DESTINATION _____

DATE _____ GRADE/CLASS _____

DEPARTURE TIME _____ RETURN TIME _____

TEACHER/SUPERVISOR _____

PURPOSE OF THE FIELD TRIP _____

Please note the following:

- ___ Student will wear school uniform. ___ Gym uniform ___ Regular school uniform
- ___ Students may wear casual clothes suited for the field trip and in accord with school policy.
- ___ Students will bring their lunches (Identified with name and grade)
- ___ Lunch will be provided for the students.
- ___ Students may purchase lunches at their own expense.
- ___ Other: _____

- ___ Cost for the field trips is \$ _____ due by _____

Transportation

- ___ Bus – provided by _____
- ___ Public Transportation – provided by _____
- ___ Walking

Cut Here

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Please **PRINT** student's first and last name and date of birth GRADE _____ ROOM _____

FIRST NAME _____ LAST NAME _____ DATE OF BIRTH _____
has permission to attend this field trip.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

Please place the permission form and the required fee in an envelope. Include student's name and room number.)

(A COPY OF THIS FORM IS RETAINED IN THE SCHOOL OFFICE. THE ORIGINAL FORM WILL ACCOMPANY THE TEACHER ON THE FIELD TRIP)