

**FIELD TRIP PERMISSION
COLOMA ELEMENTARY SCHOOL**

WE ARE GOING TO: _____

PURPOSE OF TRIP: _____

DATE OF TRIP: _____

TRANSPORTATION: **BUS** **WALKING**

LEAVING SCHOOL: _____ RETURN: _____

COST: _____

TEACHER(S): _____

I GIVE MY PERMISSION FOR _____ TO
GO ON THE FIELD TRIP. STUDENT NAME

PARENT SIGNATURE: _____

PLEASE HAVE YOUR CHILD'S PERMISSION SLIP TURNED IN BY:

AMOUNT DUE: \$ _____



COLOMA ELEMENTARY SCHOOL
468-2420