Parental Consent for School Field Trip

Date: _____

To: [Teacher's Name] [School Name] [School Address]

Dear [Teacher's Name],

I, [Parent/Guardian's Name], the parent/guardian of [Child's Name], a student in [Grade/Class Name], hereby give my consent for my child to participate in the upcoming field trip to [Destination] on [Date].

Medical Information: Please note any medical conditions, allergies, or special considerations for my child:

Emergency Contact Information: Name: ______ Phone Number: ______

I understand that all safety precautions will be taken during this trip and that I may reach you at [Contact Number] if needed.

Thank you for providing this opportunity for my child.

Sincerely,

[Parent/Gua	rdian's Name]	
Signature: _		
Date:		