

Pleasant Grove Baptist Church's PLUG IN Ministry (Youth Ministry)
FIELD TRIP PERMISSION FORM

We would like for your child/children to accompany us on a field trip to:

Date:	
Time:	
Location:	

Cost (If Applicable):	
Transportation:	
Notes (Medical/Insurance):	

Please return this permission slip by: _____

I give permission for my child/children,

_____, to attend the field trip to

_____ on _____

from _____ to _____.

Enclosed is \$ _____ to cover the cost of the trip. (Exact cash or check made payable to the ministry or visiting site.)

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

(Name)

(Phone Number)

(Parent/Guardian Signature)

(Date)

