



Field Trip Permission Form

I, _____, give permission for _____ to attend the following field trips listed below.
 Parent's Name Child's Name

Location	Date	Depart Time	Return Time	Yes, I Give Permission (Full Signature Required)	No, I Do Not Give Permission (Full Signature Required)	Date
Cinemark Alliance	June 5 th	TBD	TBD			
Sharkarosa	June 6 th	8:30	3:30			
Cinemark Alliance	June 12 th	TBD	TBD			
Bowling Museum	June 14 th	9:30	3:30			
Cinemark Alliance	June 19 th	TBD	TBD			
Bicentennial Park	June 21 st	10:00	3:30			
Cinemark Alliance	June 26 th	TBD	TBD			
Amon Carter Museum	June 28 th	10:30	3:30			
Cinemark Alliance	July 3 rd	TBD	TBD			
Sea Quest	July 5 th	8:30	3:30			
Cinemark Alliance	July 10 th	TBD	TBD			
Tornado Terrys	July 12 th	12:30	3:30			
Cinemark Alliance	July 17 th	TBD	TBD			

Location	Date	Depart Time	Return Time	Yes, I Give Permission	No, I Do Not Give Permission	Date
Skate Town	July 19 th	9:00	4:00			
Cinemark Alliance	July 24 th	TBD	TBD			
Bicentennial Park	July 26 th	10:00	3:30			
Cinemark Alliance	July 31 st	TBD	TBD			
Fire Station	August 2 nd	8:45	12:00			
AT&T Stadium	August 7 th	9:00	4:30			
Luv 2 Play	August 9 th	10:00	4:00			
Cinemark Alliance	August 14 th	TBD	TBD			
Bicentennial Park	August 16 th	10:00	2:00			
Cinemark Alliance	August 21 st	TBD	TBD			
CiCi's Pizza	August 23 rd	11:00	2:00			

Emergency Contact Numbers

Mother _____, Daytime Number _____, Father _____, Daytime Number _____

By signing below, I am agreeing and consenting to all terms and conditions regarding all field trips. I have reviewed the field trip rules and agree to review them with my child(ren).

Parent's Signature

Shirt Size (Please Circle): YXS YS YM YL YXL Adult Small