



**AHAYAH ACADEMY LEARNING
CENTER
Field Trip Auth Form**

Child's Name _____ Sex _____ Age _____ Date of birth _____

Home Address (Street) _____

City _____ State _____ Zip _____

Home Phone Number _____

Parent/Guardian Name _____ Cell Phone Number _____

Dear Parents/Guardians:

There are a few field trips planned for the school year. Parents and Guardians will be provided the details associated with the trips as the dates approach. Your signature is required in order for your child(ren) to go on the field trip.

My child _____ has my permission to participate in the field trips scheduled for this academic year.

Name: _____

Signed: _____ Date: _____

Thank you for completing this permission slip.

