

PERMISSION SLIP

My son/daughter,			may attend
, <u> </u>	(Please Print - Stud		·
the field trip sponsored by tl	ne Great Plains Techr	nology Center	
	(on	to
(Name of Class)		on (Date)	
(Town and Place)	<u>.</u>		
Transportation will be via			, leaving at
_	(Type of T	Fransportation)	<u> </u>
	_ and returning by ap	poroximately	
(Time)	_ and rotal inig by ap	(Tir	ne)
Student is responsible for b	ringing the following it	ems:	
Student is also responsible			
As a student at Great Plains I the school's policies while on a my school and my peers.			
(Student's Sign	ature)		
If my son/daughter is found in understand that I will be res understand that I will be cont numbers below where I may be	ponsible for the expendacted immediately shou	se of sending my son/dau	ighter home.
(Signature of Parent	or Guardian)	(Home Pho	one #)
(Emergency Pho	 one #)		