

**DAYCARE**

**FIELD TRIP PERMISSION SLIP**

Dear parents or Guardian,

Your child is going on a field trip. Please read the information at the top of this form and sign and return the permission before the summer camp begins.

Sign the part of the form below

\_\_\_\_\_ has permission to attend our field trip with Imagina day care or Imagin3mos daycare.

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_