FIELD TRIP PERMIT

	Date:	
	on to go with	grade/class of
St. Aloysius School on a field trip to		
on, 20 The complete cost of the trip, including		
will be \$		
Transportation to and from school will be by bus. Our departure time will be Our approximate time of return will be		
I hereby release St. Aloysius and the Diocesan School Office, Diocese of Baton		
Rouge and all of its official representative	•	•
accident or injury involving	whi	ich is related to the
school trip.		
On this day, I can be reached at phone number		
-		
	signature o	f parent
LUNCH (Please check one.)		
My child will need a bag lunch from the cafeteria.		
My child will have a bag lunch from home.		
CHAPERONE INFORMATION Please check the appropriate the propriate of the control o	riate statement(s).	
I will NOT be attending the field trip.		
I will be attending the field trip. (Please see below.)		
I AM child protection certified (with fin	gerprints) and wou	ld like to be an official
chaperone I am NOT child protection certified and	would like to atter	nd as a parent guest.