



NAPLES CLASSICAL ACADEMY

Parental or Guardian Permission Slip

Permission is granted for _____ to go on a field
(Student Name) (Grade)

trip to _____ on _____ at _____
(Destination) (Date) (Time)

accompanied by authorized persons employed by Naples Classical Academy.

Admission Price: _____ Estimated Return Time: _____

TRANSPORTATION: _____ Commercial carrier _____ Private vehicle

EMERGENCY INFORMATION:

Contact: _____ Phone: _____

Will your child require any special medication while on the field trip? ___ Yes ___ No

If yes, please explain: _____

Does the NCA Clinic have this medication? ___ Yes ___ No

Please explain: _____

FIELD TRIP LUNCH: Place a check mark next to one of the options.

___ Buy Lunch from NCA cafe ___ Bring Lunch ___ No Lunch Needed

(Parent/Guardian Signature)

(Date)