

Guilford County Schools
PERMISSION SLIP FOR FIELD TRIP
547 Southeast Guilford High School

Destination:	Alamance, PG, Nat Greene, Simkins	Teacher Name:	Melissa Rich
Departure:	05/20/2026 09:30:00 AM	Return:	05/20/2026 10:15:00 AM
Mode of Transportation:	Yellow Bus		
Additional Information:			

Admission Cost: \$ _____ Miscellaneous Cost \$ _____ Total Cost: \$ _____

Please fill in the bottom portion and return to school with any payment indicated above

I, the parent or guardian of the student named below, give my permission for my child to participate in the field trip described above according to the policies and provisions as stated above. In the event of an accident or medical emergency, I authorize the supervising teacher(s) to seek medical assistance, and I will assume responsibility for all expenses.

Name of Student: <i>(Please Print)</i>	DOB:		
Name of Parent/Guardian: <i>(Please Print)</i>			
Parent/Guardian Physical Address:			
Parent/Guardian contact numbers: (home):	(h):	(w):	(cell):
Alternative emergency contact name:	Relationship to child:		
Alternate emergency contact phone #'s:	(h):	(w):	(cell):

Health Insurance Information (including company and policy/group information): _____

Medical Information and Release

Doctor's Name: _____ Phone: _____

I authorize the following regarding medications. Initial those applicable:

_____ none to be taken.

_____ authorized per existing "Authorization of Medication for a Student at School" form.

_____ authorized per the attached special authorization form (submit the "Authorization of Medication..." form found at Procedure JGCD-P to include medicines beyond the normal school day during this trip).

A field trip has been planned that will serve as an enrichment experience for those students participating. The trip will serve as a preparatory/follow-up activity to enrich a regularly scheduled part of the instructional program. Students will not be allowed to make the trip unless parental permission is granted.

The school system is responsible for students based on the laws of the state of North Carolina. In the event that an accident happens, medical assistance should be sought immediately. The parent will be contacted, and medical charges will be assigned to the parent or guardian.

The behavior of our students as it relates to a field trip is of critical importance. Students are always expected to be on their best behavior. Regrettably, inappropriate behavior can result in disciplinary action, including in extreme cases being returned home separately at the parent's expense.

The details outlined above are provided for your information.

Please indicate health problems concerning your child. Include any medications, allergies or other instructions:

I have read the information, verified its accuracy, and agree to the statements made above:

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date