

Educational Trip Participation Agreement

Student Name:

Parent/Guardian Name:

School Name:

Trip Destination:

Trip Date:

Emergency Contact Number:

Agreement:

I hereby permit my child to participate in the above-mentioned educational trip. I have read and understood the trip details and agree to the terms set by the school. I authorize the school staff to act on my behalf in case of an emergency.

Parent/Guardian Signature:

Date:

Submit