

# Classroom Offsite Event Consent Sheet

Dear Parent/Guardian,

Please complete this consent form to give permission for your child to participate in our upcoming offsite classroom event.

Student Name:

Parent/Guardian Name:

Event Date:

I hereby give permission for my child to attend the above described offsite classroom event.

☐ I Agree

Emergency Contact Number:

Special Instructions/Allergies:

Parent/Guardian Signature:

Date:

Submit