



# Field Trip Permission Form: Grace Gate Gallop

**Return form by: Mon, April 24th**

**Send snack donation: Wed, April 26th - Fri, April 28th**

<b>Location</b>	<b>Pitts Park</b>	
<b>Mode of Transportation</b>	<b>Walking or driving</b>	
<b>Date</b>	<b>Friday, April 28th</b>	
<b>Time</b>	Depart: <b>11:45pm</b>	Parent pick-up from park: <b>2:30pm</b>
<b>Snack Donation</b>	<b>preschool/pre-k/K: bag of whole washed apples or a bag of washed grapes</b> <b>1st/2nd: bag of cut oranges or a bag/box of clementines</b> <b>3rd/4th: box of granola bars (no nuts please)</b>	
<b>Attire</b>	<b>TLS Spirit shirt, shorts or pants, sneakers</b>	
<b>Additional Information</b>	Parents may choose to drive their children to the park, or we will walk as a group. Please indicate below if you'd like to walk with us or if you will drive your child (and if you're able to drive any other students).	

***Important: Please keep the top portion of this field trip permission form for your records.***

✂-CUT HERE -----✂-CUT HERE -----✂-CUT HERE -----✂-CUT HERE-----✂-CUT HERE

I give my child, \_\_\_\_\_, permission to attend the field trip  
to \_\_\_\_\_  
on \_\_\_\_\_.

**TRANSPORTATION ARRANGEMENTS (Please check appropriate box):**

**I will walk over to Pitts Park with TLS.**

**I will provide transportation for my child.**

Are you willing to provide transportation for students other than your own?      Yes                      No

If **yes**, how many ADDITIONAL children are you willing to transport? \_\_\_\_\_

If providing transportation, you're considered a volunteer for TLS. Please turn in background check (free at Sheriff's office) and copy of your Driver's License to the school office.

**I will meet the TLS group at the park (student pick-up is from the park at 2:30pm).**

I hereby consent to allow my child to ride in a vehicle with a TLS volunteer driver. By signing this form I am specifically granting my permission for transportation to and from The Little School. I am aware of the risks and willingly assume those risks on behalf of myself and my child. I agree to release, hold harmless and indemnify The Little School, its Board of Trustees, employees and their spouses from all claims, damages, or other liabilities for injuries my to son/daughter which are not the result of gross negligence, intentional neglect, or willful conduct by the school, its Board of Trustees, employees and their spouses.

\_\_\_\_\_  
Parent/Guardian Name (print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

