

FORM 1610-35A Field Trip/Extracurricular Trip Information Form

To the Parents(s)/Guard	dian(s) of				
School:			Grade:		
Please read the content Clarify any questions or		h the Lead teacher.			
PROGRAM / ACTIVITY IN	FORMATION				
Destination/Activity:			Date(s):		
Purpose (or Educatio	nal Goals): _				
Itinerary / Activities:					_
Method of Transportation:			By:		_
Depart on	at	(time) from		•	
Return on	at	(time) to		•	
Lead Teacher: _		contact #		_ No.	of
supervisors Planned:					_
Supervisory Arranger	ments:				<u> </u>
Cost to the Student:		What to bring:			_
Additional Comment					
Consent was pre	viously pro	vided for your student to	participate on t	his trip.	