

352-Exhibit 2  
 School District of Lodi  
 Non-Extended Field Trip Permission Form  
 Lodi \_\_\_\_\_ School

**Dear Parent/Guardian:**

**Your child has the opportunity to participate in the following field trip away from school.**

<b>Teacher:</b>	<b>Trip Date:</b>	<b>Grade Level:</b>
<b>Trip Destination:</b>		
<b>Trip Purpose:</b>		
<b>Special Clothing Requirements:</b>		
<b>Type of Transportation:</b>	<b>Location of Departure:</b>	
<b>Time of Departure:</b>	<b>Approx. Time of Return:</b>	
<b>Basic Cost of Trip:</b>	<b>Money Due By:</b>	
<b>Additional Spending Money</b> <input type="checkbox"/> encouraged <input type="checkbox"/> will not be necessary		
<b>PARENT/GUARDIAN COMPLETE:</b>		
_____ has my permission to participate in the described field trip.		
<b>Will your child need to take any medication during this field trip?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the necessary times and instructions for administering medication. The medication must be carried by the teacher.		
<b>Does your child have any health conditions/or require special accommodations that chaperones on this field trip should be aware of?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		
<b>Please provide a primary and a back-up telephone number where a parent or designated guardian can be reached during this field trip.</b> Primary _____ Back-Up _____		
<b>The teacher will accompany your child on the trip and will use all reasonable precautions with regard to safety and general welfare. If for behavioral/disciplinary reasons your child must return from the trip early and separate from the participating group, you will be responsible for any additional incurred trip expenses.</b>		
<b>Please sign below to indicate permission for your child to go on this trip.</b>  <b>Signature:</b> _____ <b>Date</b> ___/___/___		

**Please return this permission form not later than \_\_\_/\_\_\_/\_\_\_**