



SOMERSET COUNTY VOCATIONAL & TECHNICAL SCHOOLS

P.O. Box 6350 • 14 Vogt Drive • Bridgewater, NJ 08807-0350 • (908) 526-8900 • www.scvths.org

FIELD TRIP PERMISSION FORM

This permission slip is utilized for school sponsored field trips. Every student participating in a SCVTHS field trip must complete and return this form to the instructor/teacher in charge of the trip at least two (2) weeks before the actual trip.

Student _____ Shop _____ Session (A, B, C) _____

Address _____ City/Town _____ Zip _____

Home Phone _____ Emergency Phone _____

Cell Phone _____ Email _____

I hereby give consent for my child, age _____ to participate in the following school sponsored trip; and furthermore release said from all liability for injuries sustained by my child or resulting from participating in this trip.

*Date & Time of Trip _____ Destination _____

Instructor/Teacher in Charge _____ Signature _____

Parent or Guardian (Circle One)

Permission to participate in the above field trip is granted by the student's sending district.

District _____ School Official's Signature _____

School Official (Print Name) _____

***Permission slip forms must be returned to the Instructor/Teacher in charge at least one week prior to the date of the trip. Failure to return signed permission slips on time will determine the student's participation.**