



PARENT CONSENT FORM : FIELD TRIPS

Date of Signature

MINNEAPOLIS PUBLIC SCHOOLS
Urban Education. Global Citizens.

Student Name

Student ID No

The above - named student has my consent to take the field trip described below:

Group/ Grade/ Classroom No.

Date and Time of Field Trip

Destination of Trip / Activity

Teacher or District Staff who will accompany students

Contact information (optional)

I understand the arrangements, and believe the necessary precautions and plans for the care and supervision of the students during the trip will be taken. Beyond this I will not hold the school or those supervising the trip responsible.

Previously published as Form 900

Single Trip ONLY— MPS Policy 6230 12/1975

Parent or Guardian Signature



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