

**Parent General Consent Form**

**2023-24**

Student's Name \_\_\_\_\_ Teacher \_\_\_\_\_

**PLEASE INITIAL THE APPROPRIATE SPACE BELOW FOR THE FOLLOWING ITEM:**

1. From time to time throughout the school year, students will have the opportunity to take field trips. Notification of these trips will be sent to you. I give permission for my student to go on field trips.

\_\_\_\_\_ Yes                  \_\_\_\_\_ No

\_\_\_\_\_  
*Parent Signature*

\_\_\_\_\_  
*Date*