

Heirway Christian Academy

PERMISSION SLIP

I, _____, grant permission for
(Parent's Name)

_____ to participate in
(Child's Name)

FIELD DAY on Monday, May 16, 2022 8:30-11:30am
Name of Event (Date/Time)

Transportation will be via _____
Bus, Van
(Mode of Transportation)

I also understand that I am granting permission for my child to travel by the mode of transportation listed above and I am assuming all responsibility for my child and will not hold anyone liable including Heirway Christian Academy for any injury incurred during the time of travel and the event itself.

I also understand that this Field Trip is for only students in the first (1) thru sixth (6) grades and I will not bring siblings or friends to accompany me on this trip

I have attached \$ _____ for **KONA ICE.**

In case of an emergency, contact us at _____
(Parent's Daytime Number)

I grant permission this date _____
(Month/Day/Year)

(Parent's Signature)