

Bonita School District #16

Activity Trip Information Form

To the Parent or Guardian of Students in the _____ at Bonita Elementary School
Grade/Class

_____ Is planning an Activity Trip to: _____

_____ on _____ . The

time of departure is _____ . The date and estimated time of return is _____

The purpose of the activity trip is _____

Eating arrangements will be _____ at _____

Other information: _____

Transportation will be provided by: _____

Special clothing required for this will include: _____

The location of the activity requires that each student be able to accomplish the following physical tasks:

To be filled out by the parent/guardian and returned to school.

Please be aware of following medical concerns.

My (son/daughter) has permission to attend this activity.

Signature

Date