

Destination: \_\_\_\_\_ Date: \_\_\_\_\_

## Class Field Trip

Please check		List of Students	Emergency Telephone Numbers
Trip going	Return trip		
1			
2			
3			
4			
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25			

Adults (Teachers & Chaperones)			Emergency Telephone Numbers
1			
2			
3			
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9			
10			
11			
12			

**PLEASE NOTE -**

Before the bus leaves

This form must be completed and copies given to each of the following:  
the building administrator, the bus driver, and copy kept by the teacher