

**Plano Independent School District**  
Permission for Student to Participate in School-Sponsored Trip

Name of Event: \_\_\_\_\_

Date(s) of Event:           Departure: \_\_\_\_\_ Return: \_\_\_\_\_

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

I desire that my son/daughter be allowed to travel to and from the event listed above and to participate in this event.

\_\_\_\_\_

Printed Name of Parent/Guardian

Signature of Parent or legal Guardian

Date

\_\_\_\_\_

Printed Name of Student

Signature of Student (if 18 or more years in age)

Date

**NOTE:** Student Medical / Emergency Information Card must be on file in the school office.