

Field Trip Permission Slip

I, _____, am the Parent and/or legal guardian

Of _____, a minor, and agree that Plant City Black Heritage/Lots of Hugs Summer Reading Program is organizing the following trips:

DESCRIPTION: For All Field Trips for the summer

Duration: 06/01/2025- 08/01/2025

_____ has my permission to attend the field trips and participate in all the related activities. Plant City Black Heritage/Lots of Hugs Summer Reading Program and any chaperones or employees, servants and agents of Plant City Black Heritage/Lots of Hugs Summer Reading Program, are hereby given the following authority on the time period indicated above.

- To consent to any medical treatment that may be required by _____ in the place of and with the same authority as _____.
- Plant City Black Heritage/Lots of Hugs Summer Reading Program, and the employees, servants and agents of Plant City Black Heritage/Lots of Hugs Summer Reading Program, are hereby released from liability for all actions taken in good faith during the trip.

Dated: _____

Parent Signature