

**MONMOUTH COUNTY VOCATIONAL SCHOOL DISTRICT
ACADEMY OF ALLIED HEALTH AND SCIENCE**

FIELD TRIP PERMISSION FORM

Members of the **National Honor Society** will be participating in the **Ocean Clean Up** on **Saturday, October 18th from 9-11AM** at **Seven Presidents Park in Long Branch**. Please wear closed shoes and dress appropriately for the weather. Also bring work gloves. Students must provide their own transportation.

_____ has my permission to participate in this event.
(Student's Name)

In the event of a **MEDICAL EMERGENCY** I give permission for
_____ to receive **EMERGENCY MEDICAL TREATMENT**.
Student's Name

Parent/Guardian Signature

Date

Parent Home Phone # _____

Parent Work Phone # _____

Student's Address _____