

Bentonville High School

PERMISSION TO TRAVEL FORM

Trip Information:

School Contact(s): Terry Hicks

Contact Phone: (479) 254-5122

Date of Travel: 10/06/2018

Purpose of Travel: All-Region Auditions

Location of Travel: Siloam Springs **Middle School**, 600 S Dogwood St, Siloam Springs, AR 72761

Departure Time: 12:00 PM

Return Time: 10/06/2018

I/We give permission for _____ to travel on school provided transportation for this school-related activity. I/We understand that all students involved in this activity will travel to and from school on school provided transportation unless clearance has been made by the teacher, coach, principal or doctor due to extenuating circumstances. I/We acknowledge that the return time to school for these events is sometimes at a late hour (note Return Time above). A reliable means of transportation home for the student will be waiting when the student returns to the school.

Home/Family Information:

Home Address: _____

Phone: _____ **Emergency Phone:** _____

Insurance Company: _____ **ID#:** _____

Parent Signature

Date

Student Signature

Date
