Shining Stars Preschool

Field Trip Permission Slip

Dear	Parents:

Parent/Guardian Signature	Date
Preschool during the school year.	
to participate in the field trips plan	nned by Shining Stars
(St	rudent's full name)
I give permission for	
Shining Stars Preschool	
Sincerely, Shining Store Preschool	
•	
attend trips planned this year.	11001011 101 y 0 011 011110 00
Please sign below indicating pern	
other relevant information regards	ing each trip.
experiences. You will be provide	d with dates, times, cost a
opportunities to expand and enhan	nce our students'
Field trips are scheduled through	out the year to provide
child to attend field trips planned	by Shining Stars Preschool
Your signature is needed on this	form in order for your