



FIELD TRIP PARENT DROP OFF/PICK UP NOTIFICATION FORM

On _____ your child's class will be taking an educational field trip to:

Location: _____

We will be departing The PREP School at: _____

We expect to return to The PREP School by: _____

The children are transported by The PREP Bus to and from the field trip.

I, _____

the parent/guardian of: _____

will be dropping off

picking up

my child on the field trip at _____ am pm.

I can be most easily reached in case of emergency on the date of the trip at the following number(s):

Parent Name:

Cell Number:

Parent Signature:

Date:

PREP Management Signature:

Date:

PREP School Location: 3361 N. Lakeline Blvd., Leander, TX, 78641

PREP School Email: Director@prepcrystalfalls.com

PREP School Fax Number: 512-240-7240