

2025-2026
FOLSOM EDUCATION CENTER
PERMISSION FORM

I/we give permission for _____ Grade _____
(Student's Name)

to participate in all school-organized/supervised field trips which are considered by the school to be an important part of the educational program. I understand that this does not cover sports events and that I will be notified by the school of the time and nature of such trips prior to their departure. I further understand that transportation for these trips will be either by school bus or private car.

(Parent/Guardian Signature)

(Date)

Please check all appropriate boxes.

My child _____.

_____ allowed to ride bike to and from school

_____ allowed to walk to and from school

DAILY BUS DROP-OFF

Pick up-please write address

Drop off-please write address

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

(Unless we have a note to indicate otherwise, your child will be picked up and dropped off daily at these locations ONLY.)

Office Note: Pick up Bus Route _____ Office Note: Drop off Bus Route _____

From time to time for birthday parties, play dates, etc., we have requests for student names, phone numbers, mailing addresses and email addresses. This is considered directory information and may be released unless parents specify otherwise. Additionally, the PTO likes to keep parents up to date and informed about student activities. Please indicate below if you **do not** want this information released.

_____ I **do not** want my child/ren's name, phone #, mailing address or my email address included in released class list or to the PTO.