

# ARLINGTON INDEPENDENT SCHOOL DISTRICT

## Permission To Travel

TO: Parents/Legal Guardian of: \_\_\_\_\_  
**Student Name**

I give my permission for the above student of the Arlington Independent School District to attend the following district approved trip(s) this school year:

Description of Trip	Date	Means of Transportation
Choir camps	August 2017	various
Solo & Ensemble		
All State Auditions		
UIL Concert & Sightreading Contest		
Show Choir Tour		
Choir Trip - Airplane, bus, subway, boat	June 2018	

The supervising sponsor(s) for the trip(s) listed above are: **Toni Worley, Greg Haugen, Nelson Romo**

The local board policies governing student conduct and discipline are applicable to students on all district approved trips and the behavior of all participating students is expected to conform to the standards set forth in such policies. All violations of such code of conduct by any student shall be reported to the principal.

\_\_\_\_\_  
**Print Parent Name**

\_\_\_\_\_  
**Parent Signature**

**Persons to Contact in Case of Emergency: (REQUIRED)**

1. \_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone Number

2. \_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone Number