



## **Cheshire Public Schools**

**29 Main Street  
Cheshire, Connecticut 06410**

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### **In-District Transportation and Field Trip Permission**

I give my child permission to walk or be transported within the school district, accompanied by teaching staff and chaperones, to activities such as, but not limited to: school orientation, Music Program practices or concerts at other Cheshire facilities, programs held at other schools, town parks, the Senior Citizen Center, etc.

I understand that a notification explaining the location and purpose of the event will be sent home. Medical information will be made available to teaching staff and chaperones.

Parent/Guardian Printed Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_