

Diman Regional Vocational Technical High School

Fall River – Somerset – Swansea – Westport

Rogerio Ramos, *Superintendent-Director*
rrosos@dimanregional.org

251 Stonehaven Road
Fall River, Massachusetts 02723

Brian S. Bentley, *Assistant Superintendent-Director/Principal*
bbentley@dimanregional.org

Telephone 508-678-2891
FAX 508-679-6423

Student Field Trip Permission Form

Student Name: _____ **ID#** _____

Year of Graduation: _____ **Shop:** _____

Date of Trip: _____

Destination: _____ **Cost of Trip:** _____

City/Town/State: _____

Purpose of Trip: _____

Departure time: _____ **Return time:** _____

Teacher in Charge: _____

My child has permission to attend this field trip. It is my understanding that neither Diman Regional Vocational Technical High School, nor any of its instructors or administrators assume any responsibilities for any injuries that may occur during any such field trip or during transportation to or from the selected destination.

I further understand that my son/daughter, whose name appears above, is not required to go on any such trip if he/she does not desire to do so, and that arrangements will be made for him/her to remain at Diman Regional Vocational Technical High School with other assignments in the event he/she chooses not to go on this field trip.

Parental Contact Information:

Parent Name (*please print*) _____

Relationship to Child: _____

Telephone #: Home _____

Work: _____

Cell: _____

Parent Signature _____ **DATE** _____

This form is to be returned by: _____ **to the teacher in charge.**

DATE received by teacher: _____