



Saint Anthony of Padua Grade School
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Wilmington, DE 19805
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2024-2025
WALKING FIELD TRIP PERMISSION FORM

Child's Grade: _____

I, the parent/guardian of _____
Child's name

request that St. Anthony of Padua Grade School allow my child to participate in any Walking Field Trip during the 2024-2025 school year. I understand that this permission extends to any activity during which students walk off campus to participate in an educational/recreational activity. I further understand that students will be supervised by the classroom teacher during these trips. I hereby release and save harmless St. Anthony of Padua Grade School and all its employees from any liability for any and all harm arising to my child as a result of a Walking Field Trip.

Parent(s)/Guardian(s) signature: _____

Date: _____

ONE FORM MUST BE COMPLETED FOR EACH STUDENT!