



**Lynchburg Regional Governor's
XLR8 STEM Academy**

Local Field Trip Permission Form

Student Name: _____

By signing this form you are giving your child permission to participate in any local field trips that the Lynchburg Regional Governor's XLR8 STEM Academy (XLR8) takes during the school year. A local field trip is typically taken during XLR8 class time to a location within the region the XLR8 STEM Academy serves. The XLR8 staff will provide information about each trip in advance, and it will be the responsibility of your child to ensure that you are aware of the details of each trip. This form will be kept on file in the XLR8 Office. In the case of overnight trips or trips outside the XLR8 service area, an additional trip-specific permission form must also be completed.

I have read the above information, and I give my permission for my child to participate in any and all local field trips.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

Although we have already collected your child's emergency contact information and medical information, if there are any special considerations of which we should be aware related to local field trips, please indicate those considerations below.

**If you have any questions or concerns related to this form,
please contact us at 434-832-7731**