

**OUTSIDE CENTER FIELD TRIP AGREEMENT**

My child \_\_\_\_\_ has my permission to attend the schedule field trips. I have been assured that sufficient care; under COMAR regulations will provided for my child at all times before, during and after each field trip, as long as my child is under the direct supervision of Visions Learning Center.

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_  
( Date)