Sacramento City Unified School District

**CHILD DEVELOPMENT DEPARTMENT**

**FIELD TRIP ROSTER**

**Please fill in Bus Riders**

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| --- | --- | --- | --- | --- |
| **Student Name** | **Parent/Guardian** | **Address** | **Home Phone #** | **Emergency Phone #** |
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| **Parent/Guardian** | | **Address** | | **Phone Number** |
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School Site Teacher Date

Destination

***Fax to the Child Development Office at 399-2057***

***Attention: Amy Ronsheimer***