

Field Trip/Activity Parent Consent and Permission Form

The following information is provided regarding an Instructional Field Trip that is being offered for your student. Please read the information below, complete the parent portion, and have your student return this form to his/her advisor.

To be filled out by School:

School:	Advisor:
Date of Field Trip:	Cost to Student (not to exceed \$9):
Destination of Instructional Field Trip:	
Type of Transportation:	Walking School Van School Bus Commercial Carrier Private Vehicle (must fill out Automobile Transportation Record)
Departure time:	Return time:
Educational Objectives of Instructional Field Trip:	
Students will participate in the following activities while on the instructional field trip:	

Parent, please read the following, then mark and sign the option that you choose:

<p style="text-align: center;">Student's Name: _____</p> <p>I give my student permission to participate in this instructional field trip. I understand that if any injury occurs, the school will make reasonable efforts to contact me. I give my express consent, in the event of an injury, that my student will receive emergency medical attention, anesthesia, and/or an operation if, in the opinion of the attending physician, such treatment is medically necessary.</p> <p>Parent Signature: _____</p> <p>Date: _____</p> <p>Home Phone: _____</p> <p>Emergency Phone: _____</p>	<p style="text-align: center;">Student's Name: _____</p> <p>I do not give permission for my student to participate in the instructional field trip. Please provide some other educational alternative for my student while the classmates and advisor are on the instructional field trip.</p> <p>Parent Signature: _____</p> <p>Date: _____</p>
--	---