



NOTRE DAME HIGH SCHOOL
 2701 Vermont Avenue
 Chattanooga, Tennessee 37404
 423-624-4618 Fax: 423-624-4621

Educational Trips/Outings: NOTIFICATION
 Number 1182 Section: Administration
 DUE DATE: _____

FACULTY/STAFF TO COMPLETE

STUDENT NAME: _____ ID# _____

PLACE/EVENT: _____ DATE OF EVENT: _____ COST: _____

FACULTY/STAFF IN CHARGE: _____ GRADE/CLASS TO ATTEND: _____

DEPARTURE FROM SCHOOL: _____ RETURN TO SCHOOL: _____

The educational purpose of this trip: _____

Particular Risks: _____ near water _____ near animals _____ wooded areas _____ other/explain _____

Mode of Transportation: _____

PARENTS SECTION TO COMPLETE

I/We, the parent(s)/guardian of _____ (student) request that the school allow my/our child to participate in the above-mentioned educational trip/outing. I/We hereby release, save harmless and defend Notre Dame High School and any and all of its employees, chaperones, or representatives associated with the event from any and all harm arising to my/our child as a result of this trip, or in connection with any illness or injury or cost of medical treatment in connection therewith and I agree to compensate the school/parish, its directors and agents and the Diocese of Knoxville, chaperones, or representatives associated with the event for reasonable attorney's fees and expense arising in connection therewith.

→ Parent Signature: _____ Date: _____

PARENTAL PERMISSION TO TREAT FORM

Since the Malpractice question has come to the forefront, many hospitals and doctors will not treat a child without parental consent. It is requested that you sign this form as a consent to treat your child while under the supervision of the school representative.

→ Parent Signature: _____ Date: _____

Student allergies or other special medical conditions: _____

Insurance Company Name: _____ Policy #: _____

Emergency Contact: _____ Phone #: _____

TEACHERS will sign below that they are aware that the student will miss class on the day(s) listed above. Any concerns should be noted in the comment section and/or discussed with the sponsor of the event.

Class	Subject	Teacher	Comments
1st	_____	_____	_____
2nd	_____	_____	_____
3rd	_____	_____	_____
4th	_____	_____	_____
5th	_____	_____	_____
6th	_____	_____	_____
7th	_____	_____	_____
8th	_____	_____	_____

The health and safety of every child is very important to all of us. Educational trips/outings are privileges afforded to students. No student has an absolute right to a field trip, therefore any child who abuses his or her privilege by inappropriate behavior may be denied the opportunity to participate in future outings. We appreciate your support and hope to have an enjoyable time with your child.