

Student Trip Permission Form

Student Trip Permission Form to a Water Park

ALL SECTIONS AND INFORMATION MUST BE COMPLETELY AND ACCURATELY FILLED OUT FOR STUDENT APPROVAL.

Student Trip Disclaimer

- A student trip has been scheduled for your child to a water park. Although there will be lifeguards on duty that are employed by the park, MISD feels that you as a parent should determine the appropriateness of the trip based upon your student's swimming ability. Often these parks have some water rides and slides that have height restrictions up to 42" or 48". Additionally, there may be tide pools and wave pools that may cause difficulty in swimming or in remaining upright on his or her feet.
- Students are not allowed to swim in an ocean, sea, lake, river or pond.
- Students may swim at the hotel swimming pools if: there are certified life guards supplied or the Trip Coordinator and/or Administrator is monitoring. They will set any restrictions for swimming based upon the number of students, size of the pool, time available, etc...
- Any student who violates these instructions will be sent home at the parents' expense.
- The Trip Coordinator and Administrator reserve the right to search the rooms, luggage, personal belongings, and persons of any student at any point before, and during a school-related trip. By signing this form, you acknowledge that you received notice prior to the trip and acknowledge that students and their belongings are subject to random search during the trip.

<u>This por</u>	tion of the form is to be fil	led out by the sch	ool prior to distributio	n to the parent or gua	ardian.
Campus/Class:		De	Destination:		
Departure Date/Time:		Re	Return Date/Time:		
Return the Form to:			Date Form is due:		
					_
Student Last (print)	First	MI	Student's Date of	of Birth	Student Grade
indemnify, and hold I claims, suits, demand accident or injury to t In the event th to rules established by	sonably within the contrarmless the Mansfield s, costs, and expense (in the student and the costs at a student must return to the teacher in charge, et	ISD, their agents cluding attorneys s of medical servi o Mansfield ISD in the, we agree to ac	s, teacher(s), staff or s' fees and costs) are ces.	r chaperones, from a ising from such active	any and all liability, vities, including any nt, failure to conform
care, transportation and	l other incidental expense	es.			
Parent/Guardian (print)	Phone #	Cel	1#	Doctor Name and P	hone #
Parent/Guardian (signature)			Alternate Emergency Contact Name and Phone#		

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