



Keeneyville Elementary School District #20 Field Trip Permission Form and Release

Student's Name _____

Student's Address _____

I, Mr./Mrs./Ms. _____ hereby give _____
(print name) *(student's name)*

permission to attend the field trips sponsored by District 20 schools unless I notify them otherwise.

This Permission Form and Release has been executed by the undersigned parent or legal guardian only after understanding and considering the following:

I understand the student is expected, and the student has been instructed by me, to act appropriately and to do exactly what he or she is instructed to do by the supervisors. I also understand that the student must be in good academic standing in order to participate in the trip.

I am aware and agree that Greenbrook School, Waterbury School, and Spring Wood Middle School and the Keeneyville Elementary School District #20 are not and shall not be financially responsible for any injury occurring during this activity. I represent that the student has insurance through my own insurance carrier. I request that the above-name student be allowed to participate in the trips planned and specifically consent to his/her participation. **(Please Note: There will be individual permission forms that you will be required to sign prior to each individual field trip.)**

If any emergency medical procedures, first aid, or treatment are required during the trips, I consent to the trip supervisor(s) taking, arranging for or consenting to the procedures or treatment in his, her or their discretion. In case of medical emergency, I understand that every effort will be made to contact the parents/guardians of the participant.

I release and waive, and further agree to indemnify, hold harmless or reimburse Greenbrook School, Waterbury School, Spring Wood Middle School and Keeneyville Elementary School District #20, and the individual members, agents, employees and representatives thereof, as well as trip supervisors and volunteers, from and against all liability claims of any kind or nature whatsoever arising from the student's participation in these trips, including any claim which I, any other parent or guardian, any sibling, the student, or any other person, firm or corporation may have or claim to have, known or unknown, directly or indirectly, for any losses, damages or injuries arising out of, during, or in connection with the student's participation in the trips or the rendering of emergency medical procedures or treatment, if any.

Date: _____ Parent/Guardian: _____
(Signature)

Address: _____

Phone: (_____) _____