

**Calcasieu Parish School Board
Parent-Guardian Permission Form**

I hereby give permission for my child _____ to
(Student's Name)
participate in the field trip to _____ to be
(Place)
held on _____.
(Date)

I understand my child will be leaving school property and will be transported by
_____.
(Bus, Private Vehicle, Etc.)

I understand the school system has arranged for supervision. Further that teachers and other supervisors cannot prevent all injuries and that each student is expected to obey all rules, regulations, and instructions.

In the event of an emergency, I can be reached at _____.
Phone Number(s)

If I cannot be reached, I agree to permit the supervisor of this activity to authorize emergency medical treatment for my child. Further, I understand the school system does not carry medical insurance on the students. In the event of any emergency, or in case the trip is delayed for any reason, I want to make you aware of the following medical conditions, or other information, concerning my child:

I acknowledge that I am the natural and/or legal guardian and am acting in such capacity and further that I understand the contents of this document.

PLEASE PRINT GUARDIAN NAME: _____

Guardian Signature Date

Return this form to the school. Thank you.
School: Keep original in office, carry one copy on trip.

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