

Canutillo ISD
071907

INSTRUCTIONAL RESOURCES
FIELD TRIPS

EFD
(EXHIBIT)

ACKNOWLEDGEMENT OF RESPONSIBILITY AND PERMISSION FOR
STUDENT PARTICIPATION IN FIELD TRIP

I, _____ (*parent*), agree to allow my child,
_____ (*child's name*), to attend the field trip to
_____ on _____. I understand that
while student safety is a high priority for the District, under state law, the school is not
responsible for medical costs associated with a student injury.

I expressly waive all claims for medical expenses, loss of services, or other claims, and I
agree to indemnify and hold harmless the District, its Trustees, employees, and agents
from all claims made against it or them on behalf of my child.

I agree to indemnify and hold harmless the District, its Trustees, employees, and agents
from all claims made by third parties against it or them that result from my child's actions
on the trip.

I understand that the District, its Trustees, employees, and agents are not waiving any
sovereign or governmental immunity that it or they have under Texas law.

I have read and understood this release and sign it voluntarily and with full knowledge of
its significance.

I (*will*) (*will not*) be available to participate in this field trip as a chaperone.

Daytime phone numbers to contact me _____

If you are unable to reach me at any of these numbers, please contact:

Parent Signature _____ Date _____

TO BE FILLED OUT BY THE STUDENT (if required by the campus principal):

I agree to make every effort to keep up my schoolwork, and to abide by the rules and
directives of school employees. I will obey other adults chaperoning. I will not protest
disciplinary action that results from my failure to abide by the rules.

Student Name _____ Grade _____

Student Signature _____ Date _____

Note: The sponsors of any field trip should take with them copies of each student's
Authorization to Secure Emergency Medical Treatment. [See
FFAC(EXHIBIT)]
