

General Field Trip Permission Form

Field Trip Purpose: _____

Location: _____ Dates: _____

Student Name: _____ Birthdate: _____ Grade: _____

Address: _____ City, State & Zip: _____

Cell Phone #: _____ Email: _____

Parent(s)/Legal Guardian(s)

Name: _____ Phone #: _____ Home Cell

Email: _____ Phone #: _____ Home Cell

Name: _____ Phone #: _____ Home Cell

Email: _____ Phone #: _____ Home Cell

Emergency Contact Please give the name and phone number of a relative or friend who can be contacted if you cannot be reached in an emergency

Name: _____ Phone #: _____ Home Cell

Relationship: _____ Phone #: _____ Home Cell

Medications (if any): _____

Allergies (if any): _____

Medical Conditions: _____

Insurance Provider: _____ Policy Number: _____

Student Name: _____

The above-named student and the student’s parents/legal guardians hereby request permission for the student to participate in the above-named trip/activity. In consideration for the student being given permission to participate in the trip/activity, the student and the student’s parents/legal guardians hereby acknowledge and agree to the terms and conditions set forth below:

1. Student Conduct – Student understands that all rules, regulations and policies of the School and the team will be in effect at all times during the trip/activity and the Student agrees to abide by all such rules, regulations and policies. Student further understands that the school and Field Trip Organizer have the authority to establish additional rules of conduct necessary for the safe operation of the activity/trip during the entire period of the activity/trip and the Student agrees to abide by such rules.
2. Student Participation – Student and the parents/legal guardians of the Student acknowledges that the Student will be engaging in activities that involve risk of injury, which may result not only from their own actions, inactions or negligence, but the action, inaction or negligence of others, or the condition of the premises or any equipment used during the activity/trip. Student and the Student’s parents/legal guardians acknowledge and understand that there may be other risks associated in participating with the activity/trip not known or reasonably foreseeable at this time
3. I give permission for the above-named student to participate in the above-stated activity/trip.
4. Release and Indemnification – Student and parents/legal guardians of Student hereby agree to release, defend, indemnify, hold harmless the School District, its officers, directors, employees, agents, servants and representatives from any and all liability, loss, damages, claim, demand, cost or expense arising out of any action or conduct occurring while the student is participating in the activity/trip and/or while being transported to the activity/trip, whether caused by the Student, a third party, the facility and/or any other cause whatsoever .
5. I understand and consent to the fact that participation in this activity could include travel to and from the school to the activity’s location.
6. In the event of accident or illness, I authorize the staff and/or representatives to obtain necessary medical treatment for this student, and hereby release and hold harmless the District, its officers, directors, employees, agents, servants and representatives in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical costs and related bills that may be incurred on behalf of this student for any illness or injury that student may sustain during the activity and while traveling to and from the location of the activity.

The Student and the parent(s)/legal guardian(s) of the Student hereby acknowledge that they have carefully read this document and all other documents provided relating to this activity/trip, know and understand the contents of such. That they agree to abide by each of the terms and conditions stated herein and in any other document relating to this activity/trip, and that they have signed this document voluntarily and of their own free will.

Parent/Legal Guardian Signature:

_____ Date: _____

Student Signature:

_____ Date: _____