

## ALEXANDER COUNTY SCHOOLS INFORMED CONSENT FOR FIELD TRIP

A field trip has been planned to enrich the students in their classroom studies. If the student does not have parental permission, he/she will not be permitted to participate.

All lines of the consent must be filled out. The behavior of students on the field trip is of utmost importance. Inappropriate behavior will be subject to discipline and in extreme cases the student will be returned home by parents. The following details are for your information:

TRAVEL DESTINATION: \_\_\_\_\_

SUPERVISING STAFF: \_\_\_\_\_

DEPARTURE DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

BACK TO SCHOOL DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

TRANSPORTATION: \_\_\_\_\_ COST: \_\_\_\_\_

RETURN TO THE TEACHER BY: \_\_\_\_\_ MEAL PLAN: \_\_\_\_\_

=====  ===== **CUT AND RETURN SECTION BELOW.** =====  =====

PARENTAL CONSENT FOR TRAVEL DESTINATION:

Teacher: \_\_\_\_\_ Student Name: \_\_\_\_\_

Parent Name (Printed): \_\_\_\_\_ Cell phone: \_\_\_\_\_

Address \_\_\_\_\_ Date of birth (student) \_\_\_\_\_

If parents cannot be reached in an emergency, please call:

Name/Relationship to Student (Printed): \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

### **\*\*Health or Medical Information - Share necessary information with your child's teacher.**

I grant permission for \_\_\_\_\_ (student name) to participate. In case of emergency, I authorize the school district to procure any emergency medical assistance that is necessary, and I assume all expenses. I will tell the supervising teacher if my child needs medication or must self-medicate while on the field trip. I will follow the Alexander County Schools Medication Administration policy and understand that no medication will be administered without my or the doctor's own authorization.

Only individuals on the student's approved pickup list will be granted permission for dismissal. Requests for students to ride home with friends after the field trip **will not** be approved.

**Refund Policy:** If the destination company does not provide refunds for a canceled field trip, the school will not be able to issue refunds.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_