NEW HOPE ACADEMY

FIELD TRIP PERMISSION FORM

I give my permission for _____ (student), to attend the field trip to:

_____ Date: _____ , 20 ____

Time Leaving: _____ Time Returning: _____

Medical Release

I understand that every effort will be made to contact me in the event of any accident or injury to my child, but in the event that I cannot be reached, I hereby authorize the school representative to consent to whatever medical or surgical treatment may be considered necessary or advisable by the physician or nurse in attendance and treating such injuries. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power on the part of my agent to give specific consent for any and all such diagnosis, treatment or hospital care which the aforementioned physician or nurse in the exercise of his/her best judgment may deem advisable.

Release of Claims against New Hope Academy

As Parent/Guardian, I have voluntarily applied, on behalf of my child, to participate in the above-identified field trip. I understand that there are risks in my child's transportation and participation in this school-sponsored program. I hereby agree on behalf of my child to assume any and all risk of bodily injury, death, or property damage, arising out of, or caused by my child's participation in this field trip. I hereby release the school, agents, employees, from all actions or claims that my child, and/or legal representatives now have or may hereafter have for bodily injury, death, and property damage resulting from my child's participation in this field trip.

Emergency Contact Information

Print Name	Home Phone	Cell Phone	Relationship to Student

If above cannot be reached, please contact:

Print Name	Home Phone	Cell Phone	Relationship to Student

I have carefully read this agreement and am aware that this is a release of liability and a contract between me, on behalf of my child, and New Hope Academy.

Parent/Guardian Print Name	Signature

Home Phone	Cell Phone	Work Phone