

FIELD TRIP PERMISSION AND INFORMATION FORM

School Name: _____ Teacher/Organizer: _____

Trip Destination: _____

Departure Location: _____ Return Location: _____

Transportation Method: _____

Student Information:

Full Name: _____

Date of Birth: _____ Grade: _____

Health Card Number: _____

Allergies or Medical Conditions: _____

Parent/Guardian Information:

Full Name: _____

Relationship to Student: _____

Phone Number (Primary): _____

Phone Number (Secondary): _____

Email Address: _____

Emergency Contact Information (other than parent/guardian):

Full Name: _____ Relationship: _____

Phone Number: _____

Medical Treatment Authorization:

I hereby authorize the supervising adult(s) on this field trip to obtain medical treatment for the student named above in case of illness or injury that requires immediate attention. I understand that every effort will be made to contact the parent/guardian before any treatment is administered.

Liability Waiver and Indemnification:

I acknowledge that participation in the field trip involves certain risks, including but not limited to transportation, activities, and environmental conditions. I release and hold harmless the school, its employees, agents, and volunteers from any and all liability, claims, demands, or causes of action arising out of or related to any loss, damage, or injury sustained by the student during the field trip, except where due to negligence or willful misconduct. I agree to indemnify the school for any claims arising from the student's actions.

Consent for Participation:

I give permission for the student named above to participate in the field trip described herein. I understand that the

student must comply with all rules and instructions provided by the supervising adults. I acknowledge that failure to comply may result in the student's removal from the trip at my expense.

Photo and Media Release:

I consent to the taking of photographs, video recordings, and/or audio recordings of the student during the field trip and authorize their use for educational, promotional, or other lawful purposes by the school or school board.

Special Instructions or Additional Information:

PARENT/GUARDIAN SIGNATURE

TEACHER/ORGANIZER SIGNATURE

Signature: _____

Signature: _____

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