

Oscar Hamilton Elementary School

PARENT PERMISSION FORM FOR FIELD TRIP PARTICIPATION

Dear Parent or Legal Guardian:

Your child is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of employees from Oscar Hamilton Elementary School. A brief description of the activity follows:

NAME OF EVENT: _____

DESTINATION: _____

DESIGNATED SUPERVISOR OF ACTIVITY: _____

DATE & TIME OF DEPARTURE: _____

DATE & TIME OF RETURN: _____

METHOD OF TRANSPORTATION: _____

STUDENT COST: _____

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability, which may result from any personal actions taken by the named student.

I hereby consent that my child _____ (*student's name*) may participate in the event described above. I understand that this event will take place away from the school grounds and that my child will be under the supervision of the designated school employee on the stated dates. I further consent to the conditions stated above on participating in this event, including the method of transportation.

In case of an emergency please notify:

Name _____ Phone # _____

Student allergies, medical conditions or medication being taken by the student:

Parent Signature _____ Date _____