

Crockett High School
Field Trip Permission Form

Student Name _____ Grade Level 12
Please print

Student ID Number: _____

Field trip/location: Elementary Schools

Date: Friday, May 25, 2018

Time: 9:30am-11:30am

Transportation: School Bus

Recognition & Assumption of Risk Agreement & Physician Release

I, the parent/legal guardian of _____ authorize said child's full participation in the above fieldtrip, including related program activities. It is my understanding that participation in these activities is not without some inherent risk of injury. As such, in consideration of my child's participation in bus trip, I hereby release, waive, discharge, and covenant not to sue Crockett High School or employees from any and all liability, claims, demands, action, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by my child, whether caused by the negligence of the releases, or otherwise while participating in such activity, or while in, or upon the premises where the activity is being conducted.

Signature of Parent/Guardian _____ Date: _____

High School Name: Crockett High School

Signature of Participant/Student _____ Date _____

Regulations for bus trip: In order to ensure a safe bus trip, the following guidelines must be adhered to:

1. Student has the responsibility to respect the rights and property of others.
2. Student has the responsibility to recognize that his/her actions reflect upon individuals involved and upon institutions they attend.
3. If a student's behavior during the program becomes disruptive, as to compel immediate action, student will be removed from programmed activities.