

Date: _____

Field Trip Permission Form

Part A – Information to Parent/Guardian

Dear Parent or Guardian,

Your child is going on a field trip. Please read the information at the top of this form, then sign and return the permission slip at the bottom of this form by _____.

Field Trip Information:

Date: _____

Location: _____

Purpose: _____

Cost per student: _____

Note: No student will be denied participation because of economic hardship or because the student has a disability. (Board Policy 3320).

Cash or check payable to: _____

Means of Transportation: _____

Leave school: _____ Arrive back at school: _____

Meal Plan (if applicable): _____

Notice of potentially dangerous activities or situations (e.g. swimming) (if applicable) _____

Supervisor(s)/Chaperone(s):

Itinerary attached.

Save this part of the form for future reference.

Sign this part of the form and return it to your child's teacher.

Part B – Signed Permission Form

STUDENT:

I, _____ understand that while participating on field trip I will follow all school rules, the Code of Student Conduct, and any additional rules established by the principal for school trips.

Student Signature: _____ **Date:** _____

PARENT/GUARDIAN

_____ has permission to attend a field trip to _____ on _____ (date) from _____ (hour) to _____ (hour).

I give my permission for _____ to receive emergency medical treatment. In an emergency, please contact:

Name: _____ Phone: _____

Special Instructions (allergies, disabilities, etc): _____

NOTE: my child is currently being administered medication or is self-administering medication during school hours in accordance with Board policy 6125 AND, if noted below, I am requesting the administration of medication outside of school hours on a school trip/
Medications (if applicable) and instructions: _____

Enclosed, please find cash/check in the amount of _____ to cover the cost of the trip or I am requesting financial hardship for my child _____ (check here).

I understand that:

- a. I may be responsible for transporting my child home from the trip, at my expense, immediately upon request of the trip sponsor if the child violates school rules and/or the Code of Student Conduct in such a way that requires the student to be removed from the group or activity for the remainder of the trip.
- b. If the trip is cancelled or postponed a refund of fees or deposits paid in advance is not guaranteed but the school will make every effort to provide a refund when applicable.
- c. the board may not carry insurance coverage for the trip or for injuries to the student and that the parent or guardian is strongly encouraged to procure their own insurance through the board's student insurance program or through a separate insurance carrier.
- d. I consent to the trip sponsor taking, arranging for, or consenting to any emergency medical procedures or treatment that may be required during the trip, and acknowledge that I will be responsible for the costs of any such treatment.
- e. I understand that although the students will be supervised by Duplin County Schools' staff, I do assume the risk in my student's participation in the event. If I choose not to permit my child to participate in this field trip activity, the student will be expected to attend school on the day of the field trip and will be provided with meaningful alternative educational activities under the supervision of a teacher.
- f. I acknowledge that I will not seek to have the School District held liable in the event that any accident, injury, loss of property or any other circumstance or incident occurs during or as a result of my son's/daughter's participation in the field trip. This release of liability includes accident, injury, loss, or damages to the student, as well as, to other individuals or property which may result from the student's participation in the event. I hereby release and agree to hold harmless the School District, its officials, agents and employees, from any claims arising out of my son's/daughter's participation in the event(s).

I have read and understand and accept all of the statements recited above and accept full responsibility as described.

Parent/Guardian Signature: _____ **Date:** _____