



**Northern Gateway Public Schools**

**Parental**

***INFORMED CONSENT/PERMISSION FORM***

**For Field Trips and Excursions**

Parents, the following grade(s), class, or team is planning a school related field trip. Please read this parental permission form carefully, completing the shaded section, and then sign and return to your child's school.

School:		Grade(s), Class or Team:		
Title of Activity:		Date(s) of Trip:		
Location of Activity:		Time of Departure:	Time of Return:	
Description of Activity:				
Educational Purpose of Trip:				
Method of Transportation:              School Bus                                School or Division Van                                Private Vehicle                                Walking                                Other:				
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Costs to students: Transportation: \$ _____              Activity costs: \$ _____              Equipment Rental \$ _____              Other: \$ _____				
<b>Total: \$ _____</b>				
Supervisor/student ratio:		Supervisor Qualifications:		
_____ : _____				
Description of specialized clothing or equipment required:				
Rules & expectations for student conduct:				
Parents, which of the following best describes your child's ability level in the associated field trip activity:				
Expert <input type="checkbox"/> Intermediate <input type="checkbox"/> Beginner <input type="checkbox"/> Comments:				
<b>Safety Elements:</b> Educational activity programs require attention to safety. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of safety concerns related to the trip noted above.				
_____ _____ _____				
Such concerns result from the nature of the activity and can occur without fault of either the student, or the school board, its' Employees/agents or the facility where the activity is taking place. By choosing to take part in this activity, are accepting the risk that you/your child may be injured.				

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(Please see the attachment for trip itinerary)

OPT OUT

[ ] I do not give my child permission to participate in this activity.

ACKNOWLEDGEMENT:

WE HAVE READ PAGE 1, AND BY SIGNING BELOW, ACKNOWLEDGE THAT WE ALLOW OUR CHILD TO PARTICIPATE IN THE ACTIVITIES ASSOCIATED WITH THIS FIELD TRIP, AND IN DOING SO, RECOGNIZE AND ACCEPT THAT THERE MAY BE ASSOCIATED RISKS INVOLVED.

I give my child, \_\_\_\_\_, permission to participate in the above-described activity.
(name of student)

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date \_\_\_\_\_

Parents: Please sign and return this form to your child's school. Thank you.