

**GREENBURGH ELEVEN UFSD**  
**Parental/Guardian Field Trip Permission Form**

I \_\_\_\_\_ give permission for \_\_\_\_\_  
(Name of Parent/Legal Guardian) (Name of Student)

to attend the following trip: \* \_\_\_\_\_

Transportation is provided by \* \_\_\_\_\_

***Trip Itinerary and Requirements***

\* \_\_\_\_\_  
\_\_\_\_\_

- Attached is a list of any additional special conditions concerning this trip and any required equipment or supplies.

I understand that the leaders will make every effort to reach me, but in the event emergency treatment is necessary, I give the trip leaders the right to transport and authorize medical treatment on behalf of my child.

My child's physician is: \_\_\_\_\_  
(Name, Address & Telephone Number of Child's Physician)

Two emergency contacts are: \_\_\_\_\_  
\_\_\_\_\_

(Names, Address & Telephone Numbers of the Emergency Contacts)

My child has the following medical conditions that would interfere with his/her participation on this trip: \_\_\_\_\_

My child takes the following medication: \_\_\_\_\_

And I will make arrangements for him/her to receive his/her medication, as required.

My child and I have read and understand the school's Code of Conduct. We agree to abide by these rules.

I \_\_\_\_\_ (Parent/Legal Guardian) hereby covenant and agree to release and hold harmless the Greenburgh Eleven UFSD from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of participation in the \* \_\_\_\_\_ (Name of Trip).

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Date

**\* Teachers: Print, fill in, copy and then send to parent.**

11/09/12