



# Te Tsu Geh Oweenge School

ROUTE 73 BOX 2 TP  
SANTA FE, NEW MEXICO 87506  
PHONE: 505-303-1254

## Consent to Participate in Activity

Student Name: \_\_\_\_\_

Activity: \_\_\_\_\_

Date of activity: \_\_\_\_\_

Departure Time: \_\_\_\_\_

Approximate time of arrival at school: \_\_\_\_\_

City of Destination: \_\_\_\_\_

Location of Activity: \_\_\_\_\_

Faculty/Staff Sponsor: \_\_\_\_\_

Contact phone number: \_\_\_\_\_

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I hereby give my permission for my student(s), \_\_\_\_\_  
to participate in the above described activity.

In consideration of the permission granted, I, the undersigned, hereby release and discharge the above named sponsor, the Te Tsu Geh Oweenge School and Pueblo of Tesuque from all liability arising out of or in connection with the above-described activity. In the event of an accident or sudden illness, the Faculty/Staff Sponsor has my permission to render whatever emergency treatment may be deemed necessary for the above named student.

\_\_\_\_\_  
Signature of Parent, Guardian or Grandparent

\_\_\_\_\_  
Date

### Mission Statement:

Te Tsu Geh Oweenge School's mission is to involve staff, students, parents, and the community to work together to provide a positive and challenging educational program. The focus will be on academic, social and emotional development with a strong cultural foundation that prepares our students to be life-long learners and leaders in their community