North Zulch ISD

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FIELD TRIP PERMISSION AND RELEASE

This section to be completed by the supervising teacher before distribution to parents/guardians:

Destination:	
Supervising Teacher(s)/Grade(s)	
Date(s) of Trip:	
Method of Transportation:	❒ Bus ❒ Van ❒ Suburban ❒ Truck
If overnight, specify housing arrangements:	

To be completed by Parent/Guardian:

I, the parent/guardian of _____, hereby give permission for him or her to participate in the above named field trip. In consideration of the advantages of this field trip, I agree to release, indemnify, and hold harmless North Zulch Independent School District and employees from liability to bodily injury or property damage that might occur during this trip. If my child has a medical condition that requires health services and/or medication(s) while on this field trip, I have communicated those needs to the school personnel.

Printed Name of Parent/Guardian: _____

Emergency Contact Number: _____

Signature of Parent/Guardian:

_____ Date:_____

Note to school personnel:

_____

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It is the policy of North Zulch ISD not to discriminate on the basis of race, color, national origin, sex, or handicap in its programs, services, or activities as required by Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.