



**Field Trip Permission Form  
Kids College 2013**

***This permission slip will travel with your child on every field trip they take during Kids College 2013.***

I, \_\_\_\_\_ (parent name), do hereby willingly give permission for **my child**, \_\_\_\_\_, to participate in all field trips that may apply.

**Please check all that apply. Please make sure that the date of your child's field trip is correct.**

√	Course	Date	Time	Field Trip Location
	Junior Master Gardening Camp	June 17 - June 21	9:00a - 1:00p	Area gardens & farms
	Fossil Finders	June 26	8:30a - 4:00p	Area fossil digs (Surry, VA)
	Backyard History: The Civil War	July 17	9:00a - 4:00p	IOW Museum, Fort Boykin, Fort Huger
	Backyard History: The Cold War	July 19	9:00a - 4:00p	IOW Museum, Nike Park
	Hooked on Fishing!	July 23	8:00a - 2:30p	James River Pier
	Unmasking Middle School (Study/Survival Skills)	August 8	8:30a - 12:30p	Area middle schools
	Pond Paddle I & II	June 18	8:30a - 12:30p	Darden Mill Pond OR Johnson's Mill Pond
	Pond Paddle I & II	July 2		
	Pond Paddle I & II	July 9		
	Pond Paddle I & II	July 30		
	Intro to River Paddling	June 20	8:30a - 12:30p	Nottoway River* *Location may vary due to river conditions.
	Intro to River Paddling	July 11		
	Intro to River Paddling	July 23		
	Intro to River Paddling	August 6		
	Rollin' on the River	June 27	8:30a - 2:00p	Area Rivers* *Location may vary due to river conditions.
	Rollin' on the River	July 16		
	Rollin' on the River	July 25		
	Rollin' on the River	August 1		
	Paddles and Paths	June 25	8:30a - 4:30p	Area Rivers; Pine Barrens Nature Preserve *Location may vary due to river conditions.
	Paddles and Paths	July 18		
	Paddles and Paths	August 8		

**OVER**



I understand that my child is expected to abide by the safety guidelines prescribed by the course instructor and I agree to pick up my child or arrange for his/her removal if, in the sole judgment of the college, he/she fails to do so. I acknowledge that there may be inherent in this activity a risk of physical injury. However, I believe that such risk is acceptable in terms of the advantage and benefit of the activity to my child.

**Medical information of which instructors should be aware:**

- Allergies: \_\_\_\_\_
  
- Any medical conditions instructors/staff should know about:

Other Important Information:

I have read the above carefully before signing.

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Printed Name of Parent

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

**PLEASE RETURN THIS PERMISSION SLIP WITH YOUR COMPLETED REGISTRATION.**

**YOUR CHILD WILL BE UNABLE TO PARTICIPATE IN ANY FIELD TRIP  
WITHOUT THIS PERMISSION SLIP.  
NO EXCEPTIONS.**

Approved as to form by C. Tabor Cronk, Assistant Attorney General, February 7, 2001.