

Coweta County School System

P. O. Drawer 280 • Newnan, Georgia 30264-0280 • (770) 254-2800

FIELD TRIP PERMISSION FORM FOR _____ SCHOOL

Student's Name _____ Departure Time _____

Teacher/Sponsor's Name _____ Arrival Time _____

Date of Activity _____ Pick up Location _____

Nature of Field Trip/Activity _____

Mode of Transportation (Select One): Bus _____; or Private Vehicle _____. For any Private Vehicle, name both Owner _____ and Driver _____

*There is an admission charge of _____ for this field trip for each child. You have the option of helping us defray the cost by your contribution of the admission charge for your child. All children will be afforded the opportunity to participate even though you may opt not to contribute.

TEACHER APPROVAL

SUBJECT	TEACHER	APPROVAL		ASSIGNMENTS IN ADV. UPON RET.	
		YES	NO		
1 ST					
2 ND					
3 RD					
4 TH					

_____ My child will need a school lunch.
_____ I will provide a lunch for my child.

_____ I will provide my child with a lunch, but my child will need to purchase a drink from the cafeteria.

I give the teacher/administrator in charge of my son/daughter permission to see that he/she gets whatever medical treatment is necessary in the event of an emergency.

List medical exemptions (allergies, blood transfusions, handicapped conditions, etc.)

Allergies: _____

Handicapping Condition: _____

Blood Type (if known): _____

Other: _____

My child is presently taking medicine prescribed by the doctor

Name of doctor: _____

Name of medicine: _____

Amount taken: _____ Time Taken: _____

Emergency Telephone Number: _____

PARENT/LEGAL GUARDIAN APPROVAL ON BACK

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PARENTAL/LEGAL GUARDIAN PERMISSION FORM

I am the parent or legal guardian of _____.
(Name of Child)

and by signing this permission form, I hereby give my consent and permission for my child to go on the trip described on the front of this Trip Information Sheet. I have reviewed the Trip Information Sheet, and I have placed my initials at the bottom of the sheet to indicate my approval of the trip details. Although some of the anticipated details of the trip are set forth on the Trip Information Sheet, I fully understand that any and all of the details of the trip may change due to unforeseen circumstances, of which I may or may not have advance notice.

I have fully discussed the trip with my child, and I have asked the person in charge of the trip, any questions, which I may have about the trip, or the activities in which my child may participate during the trip. I understand, and have been fully advised of all the activities scheduled in connection with the trip, and I know of no restrictions on my child's ability to participate in such activities except as follows:

(If "none", then so state)

By signing this Permission Form, I acknowledge that during the trip my child will be subject to the policies, rules and regulations of the Board of Education.

By signing this Permission Form, I acknowledge that the Board of Education is not responsible for providing automobile insurance coverage on any private vehicle in which my child may be transported.

In the event of any emergency, please get in touch with me at one of the following phone numbers:
_____/_____. If I am not available, please contact:
(Name) _____ at one of the following numbers:
_____/_____.

I have read, and I fully understand the contents of this Permission Form. I have signed this form on the _____ day of _____.

PARENT/LEGAL GUARDIAN APPROVAL

_____ has my permission to go to

_____ on _____
Place Date

Parent/Legal Guardian Signature Date

If no, state reason _____.