

**Ann Arbor Public Schools  
Parent Notification and Consent Form  
For Field and /or Athletic Trips**

Dear Parent:

Please complete this form and return to me.

I hereby give permission for my child\* \_\_\_\_\_  
Student's full name Grade

to go to \_\_\_\_\_

on the field or athletic (circle one) trip described below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that my child will leave on \_\_\_\_\_,  
Date Time

And is expected to return on \_\_\_\_\_,  
Date Time

In granting this permission, I assume full responsibility for any damage to person or property caused by my child. I agree that if it is determined that my child needs medical or dental treatment I will be responsible for any such treatment determined necessary by a physician or dentist.

I further agree that if the behavior or health of my child should make it necessary to send him/her home prior to the above return time and date, I will be responsible for those expenses. I understand that no child will be sent home unaccompanied by an adult.

There will be chaperones accompanying the student or groups of students not only during the scheduled activity but whenever they leave the activity site.

Your child will need the following:

Lunch     Boots     \_\_\_\_\_     \_\_\_\_\_

\_\_\_\_\_  
Principal or authorized staff

\_\_\_\_\_  
School

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Home Phone number

\_\_\_\_\_  
City

\_\_\_\_\_  
Work Phone number

\_\_\_\_\_  
Cell Phone number

\*\*This includes children under guardianship, ward, etc.  
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