

UNIVERSAL FIELD TRIP PERMISSION FORM

I give permission for my child,	, to accompany
·	nbers and designated chaperones on field trips that are
planned or will be planned in the current school year	·.
I understand that I will be notified of any return time(s).	cost, the date, and time of departure and the anticipated
I understand that some field Trips will be	e spontaneous (i.e., Coliseum Square Park).
In granting permission, I assume respons my child while they are participating on a	ibility for any damage to person(s) or property caused by a field trip.
I agree that if it is necessary for my child I will be responsible for any and all relev	to receive medical treatment during the course of the trip, ant medical or dental costs.
_	by child should result in him/ her being sent home prior to sible for necessary arrangements and expenses.
I agree that I will not hold International Sincluded on field trips.	School of Louisiana responsible for any loss of property
academic programs including field trips v	t be current in order for my child to participate in non- where a cost will be incurred. This policy will not apply to ion (i.e., a grade is given as a result of field trip
I certify that I an	n the legal guardian of
	dures, including Discipline and Behavior Principles and the y to my child while on School Sponsored Field Trips.
Parent Signature:	Date: