

Bristol Public Schools
Field Trip Permission Form

A parent signature is required on this form for all field trips.

I have read the attached description of the field trip to be held on _____
to _____ and hereby consent to the participation of
my child, _____, in the activities describe and waive any
claim against school authorities for any injury suffered by my child arising out of his/her
participation in such activities.

I authorize school officials to send my child home, at my expense, from any field trip should
his/her behavior warrant such action.

I also consent to any emergency medical treatment that my child may require during the course
of this trip.

I understand that, because travel plans may be determined well in advance of departure, any
prepayments toward this trip may be nonrefundable.

I understand further that Homeland Security issues may force the cancellation of this trip and
forfeiture of my payment. **By signing below, I understand and accept that circumstance may
arise between now and departure which could cause the trip to be cancelled, which may
result in financial loss.**

_____ Date _____ Signature of Parent/Guardian

_____ Physician's Name _____ Phone #1 _____ Phone #2

Emergency Contact if Parent Cannot Be Reached (Name & Phone #)

Are there any medical conditions of which we should be aware? ___ Yes ___ No
If yes, please explain on the back of this form.

Will your child require medication during this field? ___ Yes ___ No
If yes, please contact the school nurse to make arrangements.