



## PARENT PERMISSION FORM

Revised 07-2017

I/We hereby grant permission for \_\_\_\_\_

To participate in an educational field trip to the Annual FPSA State Leadership Conference in

\_\_\_\_\_ on \_\_\_\_\_

and to make incidental stops enroute

and return, when determined to be necessary or desirable. In consideration of the benefits and opportunities afforded my child by his/her participation in the field trip, I/We state as follows:

I authorize the school representative to obtain medical treatment for my child in the event of injury or illness and agree to pay any expense incurred for treatment.

I understand that my child is being transported in commercial carrier chartered by the County Supervisor's Office/School Board and if an injury occurs, I understand that I shall look to the commercial carrier to pay any medical bills incurred as a result of such injury and shall release the School Board from liability.

I understand that my child is being transported in a District School Bus.

I understand that my child is being transported in the private automobile of a licensed parent, teacher or student, none of which is under the control or supervisor of the School Board of

\_\_\_\_\_ County.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian