



Field Trip Parent Consent Form

School: _____

Date of Trip: _____

Description of Trip:

- I understand that this trip is part of the District's educational program and provides a learning experience of educational value to my child.

- I further understand that the staff member(s) who will accompany the students on this field trip, will exercise the necessary and appropriate duty of care for them pursuant to Board Policy 3213, including, but not limited to, administering medication, if required, or seeking emergency medical attention, if need be.

My child, _____ has my permission to participate in this field trip.

Parent Signature

Date