

OVERNIGHT TRIP CONSENT FORM

- 1. Event: _____ Location: _____
- 2. Date of Event: _____
- 3. To: Time of Departure: _____ Time of Arrival: _____
From: Time of Departure: _____ Time of Arrival: _____
- 4. Will depart from: _____
Will return to: _____
- 5. Name of Hotel/Motel/Lodging: _____
Address: _____
City/State: _____
Phone: _____
- 6. This trip will be made in a (school vehicle/private conveyance).
- 7. Official Chaperon(s): _____
- 8. Schedule of Events: _____

(RETURN THIS PORTION TO THE SCHOOL)

MEDICAL AUTHORIZATION/HEALTH INFORMATION FORM

Event: _____ Location: _____

Name: _____ Home Phone: _____

Age: _____ Address: _____
Street City Zip

Name of Parent or Guardian: _____
Last First MI

Father's Place of Employment: _____ Phone: _____

Mother's Place of Employment: _____ Phone: _____

Family Physician: _____ Office Phone: _____

Name of person who can be contacted if parent or guardian cannot be reached:

Name: 1: _____ Relation: _____ Phone: _____

Name: 2: _____ Relation: _____ Phone: _____

List any medications you are presently taking: _____

Any known allergies or other medical problems: _____

Medical Insurance: Insurance Company: _____
Name of Insured: _____
Certificate No: _____ Group No. _____
Current coverage: _____

"In case of accident or serious illness, I request the school authorities to contact me. If I cannot be reached, I herewith authorize the school authorities to call the physician indicated above. If it is impossible to contact physician, I authorize the teacher/sponsor to arrange for all necessary medical services for said child/children on my behalf."

*Parent or Legal Guardian Signature: _____ Date: _____

*Please note that a parent/guardian signature is required on the front and back of this form.

COMMENTS CONCERNING THE CONDUCT OF STUDENTS:

- a. Students must abide by all of the rules and guidelines set forth in the current student handbook in the Klein Schools.
- b. Students will not smoke or use tobacco.
- c. Students will not consume and/or have possession of alcoholic beverages.
- d. Students of opposite sex must leave room doors open at all times when together.
- e. No students will have possession of drugs, narcotics, controlled substances, and/or marijuana or known to be under the influence thereof. (KISD policy, Student Handbook.)
- f. Observe curfews.
- g. Students will not ride in or drive any vehicle, either private or school, without a chaperon being present, unless with chaperon's permission. When riding in vehicles, student must wear seat belts.
- h. Students must cooperate with school personnel as they perform their duties.
- i. Students cannot have visitors.
- j. Students must keep chaperons informed of their whereabouts at all times.
- k. Students must attend their scheduled meetings and appointments.

NOTE: A violation of these rules will result in the student being sent home at his/her expense. Parents will be called prior to this action.

The undersigned, being the parent or legally appointed and qualified guardian of _____ does hereby consent to said student's participation in the field trip or school-sponsored activity to _____. I herewith authorize the teacher/sponsor to secure medical services for said student, if necessary. I agree to pay, either directly or through my own personal health and accident insurance policy, all medical or hospital costs. I further agree to hold the Klein Independent School District, its Board of Trustees, administration, and/or faculty, harmless from all liability for any injuries which said student may receive while participating in or while traveling to and from such event.

I have listed any pertinent information applicable to allergies, nervous disorders, heart trouble, diabetes, epilepsy, etc.

We are aware of the plans, procedures, and the above rules of conduct for this trip, and we accept and approve them. Please make a note of the above information and return to the school sponsor.

Signed: _____ Signed: _____
Teacher/Sponsor Principal

Signed: _____ Signed: _____ *
Student/Date Parent/Guardian/Date

*Please note that a parent/guardian signature is required on the front and back of this form.