

# NCCS FIELD TRIP PERMISSION SLIP



Class \_\_\_\_\_

Date of Field Trip: \_\_\_\_\_

Students will be going to: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Students will leave NCCS at: \_\_\_\_\_ and return at \_\_\_\_\_

Students need to bring: \_\_\_\_\_

Cost is: \_\_\_\_\_ (Please return money with permission slip)

Drivers are needed.

Drivers are not needed.

----- Please detach here and save this top part -----

My child \_\_\_\_\_ has permission to go on this field trip to \_\_\_\_\_ on \_\_\_\_\_

If you would like to help transport students, please check below and indicate how many you can take in your vehicle. (Each student must have a seat belt.)

\_\_\_\_\_ Yes, I can transport \_\_\_\_\_ students, which includes my child or children.

I understand the nature of the activity and risk of injury involved. I agree to hold North Coast Christian School and its agents and representatives blameless from all and any claims, dues or demands arising from the participation in this activity.

If said participant needs emergency medical care beyond first aid and I am not able to give formal consent to medical authorities, permission is given for any emergency anesthesia, operation, hospitalization, transport or other treatment, which become necessary to safeguard the life and health of said participant. A photocopy of this authorization is as valid as the original.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name of parent/guardian: \_\_\_\_\_