



**FIELD TRIP
PERMISSION SLIP**

I am the parent and legal guardian of _____, a student at Bethany Lutheran School ("BLS").
I hereby give my permission for my child to attend the field trip described below.

1. **Description of Field Trip:** _____
Mode of Transportation: _____
Date: _____
Fee: _____
Dress Wear: _____
Departure: _____
Arrival Back: _____

2. I voluntarily and knowingly assume the risks associated with the above field trip (in addition to all other customary and general risks involving my child walking to/from the field trip) and my child's presence in a non-insulated, outside-of-school environment.
3. I hereby release, hold harmless and agree not to hold responsible BLS, Bethany Lutheran Church, and all of their agents, representatives and employees from or for any liability, claims or damages suffered by me or my child related to the above-described field trip and all risk involved also stated above (Section II).
4. I represent and warrant to BLS that my child has no medical or other disclosed or undisclosed problem which poses an additional risk to my child in reference to the above-described field trip.
5. I hereby grant permission to BLS, its agents and employees to take whatever steps may be necessary to obtain emergency medical care for my child if warranted on this field trip. These steps may include but are not limited to (1) attempting to contact a parent or guardian, (2) attempting to contact the child's physician, (3) attempting to contact any of the persons listed on the emergency information form on file with BLS, (4) contacting another physician, paramedics, or an ambulance, or (5) having my child taken to an emergency hospital in the company of a staff member. All expenses incurred for such emergency medical care will be borne by me.
6. I understand that my child's attendance on this field trip is not mandatory and I further understand that if I choose not to give my consent, my child will not attend.

**Failure to return this form by the appropriate time will result in your child's
inability to attend this educational opportunity.**

Parent/Guardian Signature

Date

PLEASE SIGN AND RETURN BY: _____

I would like to be a parent driver.