



**HENRY COUNTY SCHOOLS
NON ATHLETIC CO-EXTRA CURRICULAR
PERMISSION SLIP – FORM A**

Teacher Name/Grade: Pittman/Gifted

Destination: Fairview Elementary (on-site) with the Bio-Bus

Departure Date & Time: Tuesday, October 8, 2019 & 9:00 AM

Return Date & Time: Tuesday, October 8, 2019 & 2:00 PM

Chaperones Requested: Yes _____ No X

Lunch: X Child will be allowed to buy a school lunch, or bring a lunch from home.

_____ Child will be allowed to buy a school lunch, bring a lunch from home, or purchase lunch at an outside vendor.

Transportation will be provided by in the following manner: NO TRANSPORTATION WILL BE PROVIDED, SINCE THE FIELD TRIP IS ON-SITE

_____ HCS bus transportation

_____ Other method (please sign below "RELEASE")

To be filled out by parent/guardian

Please complete and return by: Friday, October 4, 2019

Student Name: _____

_____ My child has permission to attend the field trip.

_____ My child does not have permission to attend the field trip.

_____ My child will buy a school lunch.

_____ I would like to be a chaperone.

_____ My child will bring a lunch from home.

_____ I (parent) will bring my lunch.

_____ My child will bring monies for lunch to purchase from a vendor

_____ I (parent) will purchase a school lunch.

_____ My child has medication that should be administered during this trip. (School please attached IHP.)

CONSENT

If any emergency medical procedure/treatments are required by the student during the trip, I consent to the trip's supervisor taking, arranging for, or consenting to the procedures or treatment at his or her discretion. I further release and waive any claim which I or any other person, firm, corporation, or entity may have or claim to have, known or unknown, directly or indirectly, from any losses, damages or injuries arising out of, during, or in connection with the student's participation in the activity, any trip associated with the activity, or the rendering or emergency medical procedures/treatment, if any. **I further agree to indemnify and hold harmless and reimburse the Henry County School District, the Board of Education, its successors and assigns, its members, agents, employees, and representatives thereof, as well as the trip supervisor from and for any and all claims and losses.**

Signature(s) of Parent(s) or Guardian(s)

Date

Other Transportation *RELEASE*

***If other transportation is indicated (i.e., no HCS bus transportation), please fill out below:**

While the Henry County School District provides transportation through the utilization of the District bus fleet for many extracurricular events, in some cases school sponsored transportation is not available. In those instances, it is necessary for the parent/guardian to make arrangements for transportation. The Henry County School District strongly discourages students from riding with other students to and from extracurricular events and to this end, district employees shall not assign students to ride with other students.

I, _____, parent or guardian of _____ (student), hereby give my permission for my student to ride with the parent volunteer/sponsor to/from the designated extracurricular event.

Signature (s) of Parent(s) or Guardian(s)

Date

Phone Number