



Plain Local Schools Field Trip Parent Consent Form

Name of student going on field trip: _____

Students will: _____

Date of trip: _____ Time of trip: _____ Cost of trip: _____

In granting this permission, I assume full responsibility for and damage to a person/property caused by my child or ward. Further, I hereby expressly waive any claim for liability against the Board of Education and/or Plain Local Schools, including its employees and representatives, and release them from any liability in connection with this trip. I expressly agree that in the event that disciplinary action or the health of my child/ward, may make it necessary my child/ward may returned home at my expense. I consent and will be responsible for any medical or dental treatment, which may be advisable at the discretion of any physician or dentist during the trip. It is further warranted that if one parent or guardian signs this Parent Consent Form, it is with the authority of the other.

Parent Consent For Field Trip Form

Return the portion and any fees required to your teacher by: _____

I give permission for the following individual to go on field trip: (student name)

Field trip destination: _____ Date of trip: _____

Parent/Guardian Signature: _____ Date: _____