



STUDENT FIELD EXPERIENCE AND SPECIAL ACTIVITIES PARENTAL CONSENT FORM (Routine)

Please Return This Completed Form by: September 19

Name of School: McCammon Elementary

Activity Date: October 1, 8, 15, 22 & 29, November 5

The Board of Education requires completion of this consent form for students participating in any school field experience outside of the school and activities of a special nature held on school district property. Regularly scheduled events such as basketball games require a one time approval only. Students who do not participate in field trips will be provided with supervised study.

Purpose: McCammon Soccer Team

Departure Time: After School

Return Time: TBD

Destination(s): McCammon & Various Schools (Schedule to follow)

Travel Arrangements: Parent Drivers

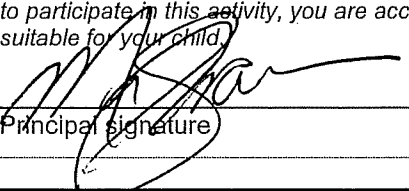
Cost to student: Free

Students will need to bring: Cleats, Shinpads, Water Bottle

Sponsor Teacher(s): Ms. Renwick & Mrs. Timms

Supervision Provided by: Ms. Renwick & Mrs. Timms

Accidents can be the result of the nature of the activity and can occur with or without any fault on either the part of the student, or the school board or its employees or agents, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.


Principal signature


Sponsor Teacher(s) signature(s)

I give _____ (full name of student) permission to participate in the field trip
to _____ on _____ (mm/dd/yy). I understand that my child may be exposed
to certain risks while participating in this activity and that accidents and injuries may occur.

Student's Care Card Number: _____

Medical Information (please include any medical or health concerns):

Signature of Parent/Guardian

Date

Printed name of Parent/Guardian

Home Phone #

/ Work Phone #

/ Cell Phone #

Alternate (Local) Contact Name

Home Phone #

/ Work Phone #

/ Cell Phone #