

Please Return By 05/05/21



FIELD TRIP PERMISSION & MEDICAL RELEASE

ALL SCHOOL RETREAT – MAY 7

Date: May 7, 2021 8:15 – 3:30

Destination: The Refuge 1380 Lower Field Rd, Ayden NC 28513

Transportation Instructions:

Students who drive can drive and park at the Retreat site.

Students who do not drive will need to be dropped off at the retreat site in Ayden by 8:15 and picked up at 3:30.

Students from New Bern, Washington, and Chocowinity who ride the bus in will ride the bus as normal directly to the retreat.

If you would like your student to carpool to or from the retreat site they may do so, but please fill out the permission below:

Name of Student: _____

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability. As parent, or legal guardian, you remain fully responsible for any legal responsibility that may result from personal actions taken by the named student.

I hereby consent to participation by my child, _____ in the event described above. I understand that this event will take place away from school grounds and that my child will be under the supervision of the designated school employee on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

(Signature of Parent/Legal Guardian)

(Date)

.....
In case of emergency, I give permission for _____ to be taken to a physician or hospital by either a parent in charge or by school personnel. I understand that every effort will be made to contact me.

Medical Information

The above named student is covered by the following medical insurance:

Insurance Co: _____ Group #: _____

Allergies: _____ Chronic Illnesses: _____

Mother's Daytime Phone: _____ Father's Daytime Phone: _____

If parents cannot be reached please contact:

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

(Signature of Parent/Legal Guardian)

(Date)

CARPOOL PERMISSION

My Child _____ has permission to arrive and/or leave retreat with

(Other student driver) _____.

(Signature of Parent/Legal Guardian)

(Date)