



PERMISSION FORM

Class/Course: Grade 8 Imm. Teacher: Jennings

Destination: Foley Mountain

Excursion Date: May 22

Time of departure: 8:30am Return time 2:00pm

Note: If bus is not returning until after end of day bus dismissal arrangements must be made for your child for pickup

Supervisor: Mrs. Jennings

Supervisor: Mrs. Peden

Other info: Please see back of page for important information.

Costs: \$ 10.00

PLEASE SIGN AND RETURN THE FOLLOWING:

I give permission for my son/daughter _____ (print name clearly) to take part in the following trip to:

Paid on line: _____ (receipt # _____)

Parent Signature

Date

Element of Risk: Any educational activity and the transportation for that activity, involves certain elements of risk. These can occur without any fault of the student, the school board, its employees or agents, or the facility where the activity is taking place. Any allergies or other medical conditions MUST be brought to the attention of the teacher/supervisor along with any appropriate medication. The CBSBEO does not provide any accidental death, disability and dismemberment insurance on behalf of the students participating in this activity