

School Trip Parental Consent and Activity Waiver

Date: _____

Dear Parent/Guardian,

Your child has the opportunity to take part in the following school trip. Kindly read the document carefully, provide the required details, and sign where indicated.

Student Information

Student Name: _____

Grade: _____

Date of Trip: _____

Destination: _____

Teacher-in-Charge: _____

Parental Consent

I, the undersigned parent or legal guardian of the above-named student, hereby give permission for my child to participate in the school trip described above. I understand the nature, purpose, and destination of this trip.

Activity Waiver & Release

I acknowledge that my child will be participating in activities that may involve certain risks. I release and hold harmless the school, its staff, and representatives from any and all liability in connection with my child's participation, except in cases of gross negligence or willful misconduct.

In case of emergency, I authorize school personnel to secure medical care for my child as deemed necessary.

Health Information

Allergies, Medications, or Medical Conditions: _____

Emergency Contact Name & Number: _____

Name (Print) Parent/Guardian

Signature

Date

Important Notes

- Read all details thoroughly before signing.
- This document is for parental/legal guardian consent; unauthorized individuals cannot provide consent.
- Accurate health and emergency contact information is essential.
- Clarify any doubts with the school staff before the trip.
- Retain a copy of this form for your records.