

## Field Trip Permission Form for \_\_\_\_\_

You must have this form completed and submitted to Mrs. Tobias by  
February 14th, 2018. This form does not guarantee you will be attending the field trip.

Who: Corinth Holders High School DECA

When: March 8th - 10th, 2018

Where: Koury Convention Center - Greensboro, NC

Time: Depart from CHHS after morning announcements on 3/8 and return to CHHS around 5:00 PM 3/10

Bring: Please see the packing list.

To Faculty: Please sign and indicate if you give permission for this student to miss your class on  
March 8th and 9th, 2018. This is a school sponsored trip and they are responsible for all  
work. We would like your input as to whether they can handle missing your class.

1<sup>st</sup> Block: Teacher \_\_\_\_\_ Yes or No

Reason: \_\_\_\_\_

2<sup>nd</sup> Block: Teacher \_\_\_\_\_ Yes or No

Reason: \_\_\_\_\_

3<sup>rd</sup> Block: Teacher \_\_\_\_\_ Yes or No

Reason: \_\_\_\_\_

4<sup>th</sup> Block: Teacher \_\_\_\_\_ Yes or No

Reason: \_\_\_\_\_

To be completed by current teachers.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Organization: \_\_\_\_\_

Field Trip Permission Slip (Detach and return to school on or before: 2/14/18)

By signing this form and giving permission for my child to go on the field trip, I make it known that I am aware of the risks associated with this field trip and hereby release the school board and its employees, agents and volunteers from all liability for accidental injuries incurred due to the negligence of my child or third parties not associated with the school system. Therefore, I understand that I have a duty to make sure that my child is aware that he/she should exercise the utmost care on the trip and that he/she should stay with his/her group and follow the instructions of his/her teacher or chaperone closely. Furthermore, I authorize the official chaperone to sign for all medical needs that may arise. I will assume financial liability and give my permission for treatment to any appropriate agency.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Child's Name \_\_\_\_\_ Home Telephone \_\_\_\_\_  
Work Telephone \_\_\_\_\_ Emergency Telephone \_\_\_\_\_  
Medical Insur. Co. \_\_\_\_\_ Policy Number \_\_\_\_\_  
Policy Holder Name \_\_\_\_\_ Physician & Phone Number \_\_\_\_\_

Effective: July 9, 2002

If your parent will be picking you up at Koury Convention Center instead of you coming back to CHHS on the bus, please have the following form filled out and signed.

**Transportation Permission for Field Trips (If student is being transported from a fieldtrip other than a bus)**  
Students attending a school sponsored field trip may ride home from a field trip in a private vehicle with a parent/guardian or an approved adult on the "student information/contact" list with permission from the student's parent/guardian and school principal. This approval is required by the school principal in advance of the trip. When privately owned vehicles are used to transport students, only the vehicle owner's liability coverage is applicable. A parent/guardian or adult driver should be aware that they may be held responsible for injuries to any individuals that they are transporting and must certify that any private vehicle used is covered by at least North Carolina State required insurance coverage.

\_\_\_ I agree for \_\_\_\_\_, who is on the approved contact list for my child, to transport \_\_\_\_\_ home from the fieldtrip to \_\_\_\_\_ on \_\_\_\_\_ (date).  
\_\_\_ I certify that the parent/guardian of the student or approved adult possesses a current operator's license that has not been suspended or revoked for any reason.  
\_\_\_ I certify that this parent/guardian of the student or approved adult is covered by at least North Carolina State required insurance coverage.  
\_\_\_ I release the Johnston County Board of Education and its employees from liability for any injuries sustained as a result of this non-school sponsored transportation arrangement.

Parent Signature: \_\_\_\_\_

Adult Approved for Transportation Signature: \_\_\_\_\_

Principal Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Effective: July 9, 2002 Revised: February 9, 2016

To be completed by parent or guardian.