

Field Trip Permission Form

Dear Parent/Guardian:

Your child is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of employees of the school system or their contracted Education for Employment instructor.

If you would like your child to participate in this event, please complete, sign and return the bottom statement of consent and release of liability. Please be advised that your student will not be allowed to participate without a signed consent form returned to school.

Please return this form	n NO LATER THAN:		
Notice of Non-discrimination: It is the policy of Kalamazoo Regional Educational Service Agency that no discriminating practices based on gender/sex, sexual orientation, race, religion, height, weight, color, age, national origin, disability, genetic information or any other status covered by federal, state or local law be allowed during any program, activity, service or in employment. The following positions at Kalamazoo RESA have been designed to handle inquiries regarding the nondiscrimination policy: Assistant Superintendents, Tom Zahrt and Mindy Miller. Contact information: (269) 250-9200, 1819 E. Milham Ave. Portage, MI 49002.			
	PARENT/GUARDIAN CONSE		
Student Name:			
School:			
Instructor:			
Destination:			
	Departure Time:		
Method of Transportation:			
Student cost (if any):			
STAFF MEMBER CONTA ACCIDENT OCCUR DU PARENT/GUARDIAN, I R	LD PARTICIPATING IN THE DESCRIBED CTING MEDICAL HELP FOR MY CHILD, IRING THE TIME AWAY FROM SC REMAIN FULLY RESPONSIBLE FOR ANY ISONAL ACTIONS TAKEN BY THE ABOVE	AT MY EXPENSE, SHOULD ILLN HOOL. I UNDERSTAND TH Y LEGAL RESPONSIBILITY, WHIC	ESS OR AT, AS
Name of Parent/Guardia	an:		
Signature of Parent/Guardian:			
Date:			