FIELD TRIP EXHIBIT

PERMISSION OF PARENT/GUARDIAN FOR AN EXTENDED FIELD TRIP

Each student must secure the permission of his/her parent or legal guardian in order to participate in a school –sponsored extended field trip. Additional instructions or comments specific to this extended field trip are attached.

Parents or legal guardians are required to complete, sign and return all parts of this approval and medical release, emergency information and health information forms and return it to their child's teacher at lease one (1) week prior to the departure date of the extended field trip.

	PERMISSION OF PARENT OR LEGAL GUA	ARDIAN	
STUDENT'S NAME			
The undersigned, parent or legal guardian of the student named above, grants permission for him/her to participate in an extended school-sponsored field trip as noted below.			
DESTINATION (s)			
DEPARTURE DATEDEPARTURE TIME			
RETURN DATE	RETURN TIME:		
SCHOOL DISTRICT STAFF PROVIDING SUPERVISION: (Approximate)			
		,	
	/ form of medication to be taken ided field trip ? (circle one)	Yes	No
If YES, please contact the school nurse at once so appropriate and timely arrangements may be made with you for the proper handling and administration of your child's medication during the extended field trip.			
Do you have cancellation	insurance in force for this trip? Yes	I	No
If NO, please sign below to waive said coverage and relieve the school district of any liability with regard to cancellation of the extended field trip.			
Date.,	Signature	,	
I understand that all school for the duration of the exte	ol policies, regulations and rules will be in effe ended field trip	ct and wil	l apply to my child
Date	Signature		

5/21/97; 1/9/02 jes