

Madison Public Schools

Madison, CT 06443

Parent / Guardian Permission and Acknowledgment of Risk for Student Travel

Teacher Directions: After your *School Trip Proposal / Request Form* has been approved, you are required to complete this form, attach a field trip description to it, and send it home to parents. Only those students whose parents have signed and returned the form to you will be permitted to go on school trips. You should follow these directions: 1) Use one form per trip: 2) complete the school portion (top half) of form; 3) duplicate one form per student; and 4) send a copy home for parent and student signatures.

Parent Direc your child's tea	etions: Please read this form, acher.	and, if you give your child p	ermission to attend the schoo	l trip, sign and return it to	
School: DHI		Prin	Principal: Salutari		
			rip Organizer(s): Soja		
Destination of	f Trip: See attached				
Educational C	Objectives: Show Choir com	npetition			
Supervision:					
Students	will be directly supervised	by adults at all times.			
Students	will be directly supervised	by adults with the following	ng exceptions		
A School	Nurse will be present on the	nis school trip.			
Transportation	n Provided: School Bus	Charter Bus	Personal Vehicle	Leased Vehicle	
Drivers of Per	rsonal or Leased Vehicles (Gr. 5-12): Parent	Teacher / Staff Member	r Other Adult	
Related Risks	: Swimming Pool A	musement / Theme Park	Beach or Ocean	Other X	
None					
	ement: tting on this school trip, I will : de of Conduct and I will follow				
Student Signature (Gr. 5-12):			Date:		
I understand the the trip may inc child to some ri that participation	dian Acknowledgment of R at participation on this school clude amusement / theme park isk of injury or even death. I have in the school trip will involve volunteers will have any response.	trip is voluntary and that it e activities and that participation ave read and understand the a solve activities of school prop	on in amusement / theme park attached description of the sch erty; therefore, neither the B	cactivities will expose my nool trip. I also understand oard of Education nor its	
Parent / Guardian Permission I give permission for			to participate in all aspects of this school trip.		
Parent / Guard	dian Signature:		Date:		
		r Daniel Hand High Schoo	ol Use Only		
Dania 4.1	Teacher Signature			cher Signature	
Period 1 Period 2			Period 4 Period 5		
Period 3			Period 6		

The Madison Public Schools cannot be responsible for reimbursements to parents or students of money submitted as "advance payment" (e.g., Broadway shows, transportation, hotels) for any field trip that the district cancels. It is strongly recommended that you personally review any tour contract with a company or commercial carrier, including its stated refund policies, before your child signs up or pays for the trip.