

## PARENT OR GUARDIAN CONSENT FOR EDUCATIONAL TOUR OR SCHOOL OUTING

The undersigned hereby reque	sts & gives permission to take (Nam	re of Child)		on
the following school supervise	d trip:		0n	
(Date).				
Transportation will be by: BUS	S CAR PUBLIC TRANSPORTA	TION *Cost of trip: \$	Bring a sack lunch: Y N	
We will leave school at:	We will be back by:			
	olve the teacher, Bethany Lutheran School, a		verning boards of any responsibility for t	the safety,
· · · · ·	hild named above, beyond such matters as m		· · · ·	
teacher's clear instructions, and assum	es personally and exclusively all responsibilit	y and liability for accident, injury,	etc., which occurs beyond those areas co-	vered by the
school Student Accident Policy, which	n may occur to the above named child during	g the time of the specific activity a	s set forth at the beginning of the paragra	ıph.
	Law (effective 1/1/2012) ild safety seat/booster seat until they are at l but is 4'9" or taller, may ride in the back sea			
	ONLY THOSE CHILDREN	JST BE SIGNED AND RE WHO RETURN THIS FO ED PERMISSION TO PAI	ORM PROPERLY SIGNED	
Parent/Guardian Signature:		Date:		
Home phone #	Work Phone#	Cell Phone	#	
If by car, I can drive - Y N Nu	mber of seat belts for kids in my car	r (Not including f	ront seats with airbags) Due to siz	ze/age
	to sit in his/her booster seat: Y N		0,	, 0
*By my signature, I acknowled	ge that Bethany will charge my <b>FAC</b>	CTS account for any field	trip costs. (No cash needed.)	
⊁				
	Cut here and return top portion. K	Keep bottom portion at home for	trip details.	
Child's Name:	Destination		Date:	
	The students will b	e back by:	Other Important Details:	
			-	
Bring my child's booster seat: ` seats with airbags)	Y N I offered to drive - Y N N	Number of seat belts I am j	providing(Not includir	ng front