

Katy Independent School District
Field Trip Information and Permission Slip

As part of our school activities, the following field trip has been scheduled:

Destination:		
Date of Trip:	Departure Time From School:	Return Time to School:

Your child (will/ will not) need to bring or purchase a sack lunch.

No child may participate in the field trip without written consent from the parent/guardian. Please note this information on your calendar. Thank you.

Date:	Teacher/Sponsor:	Grade Level/Organization:
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(Please detach here and return the bottom portion.)

Parental Permission

Please Print Student's Full Name:	Teacher's Name:
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My child, named above, has my permission to participate in the field trip to the following location:

Destination:	Date of Trip:
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It is understood that neither Katy Independent School District, nor any of its trustees, officers, employees, or organization sponsors are liable for any accident or injuries that may occur to the above named student as a result of any aspect of his/her participation on this trip.

I acknowledge that in case of an emergency, illness, or accident an attempt will be made to reach the emergency contact people I have listed. However, if no one can be reached, I authorize the school officials to take whatever action is deemed necessary in their judgment, for the health of my child. I will be responsible for any costs in the event my child must be transported by ambulance.

Please note my child has the following allergies/medical conditions and/or is currently taking the following medications:

Emergency Contact	Relationship	Home Phone	Work Phone
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Parent/Guardian Signature:	Date:
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