

Fayetteville High School Field Trip Permission Form

Student _____ Field Trip Date SAT, OCT 29
Destination Elmwood Middle School Class ORCH Teacher Hale / SANDOVEN
Return completed permission form by Monday Oct 24th (date)

Parent Consent for Trip

I, _____, permit my child, _____
(Parent's Name) (Student's Name)

to participate in the trip to ALL-REGION AUDITIONS ROGERS
(Destination) Elmwood M.S.

I understand that this trip is part of the District's educational program and provides a valuable learning experience for my child.

I further understand that the staff member(s) who will accompany the students on this field trip, will exercise the necessary and appropriate duty of care for them including, but not limited to, administering medication, if required, or seeking emergency medical attention if need be.

Parent Signature Date

Student Agreement

As the participating student, I agree to follow the FHS Student Code of Conduct on this field trip and further agree to act in a responsible manner, one that will reflect credit upon Fayetteville High School and me. Furthermore, I agree to be responsible for making up assigned work in classes missed.

Student Signature Date

Emergency Information

Emergency Contact _____ Home Phone _____

Relationship _____ Work Phone _____ Cell Phone _____

Emergency Contact # 2 _____ Home Phone _____

Relationship _____ Work Phone _____ Cell Phone _____

Health Insurance _____ ID# _____ Phone # _____

*PLEASE include \$6 AUDITION FEE
CHECK MADE OUT TO FHS.*