

PASADENA UNIFIED SCHOOL DISTRICT
PARENTAL PERMISSION AND RELEASE FORM
SCHOOL FIELD TRIPS AND/OR EXCURSIONS

PLEASE NOTE:

California State Education Code, Section 35330 in part provides:

All persons making the field trip or excursion shall be deemed to have waived all claims against the district, a charter school, or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion. All adults taking out-of-state field trips or excursions and all parents or guardians of pupils taking out-of-state field trips or excursions shall sign a statement waiving all claims. It is acknowledged that participation in the field trip is completely voluntary. There is no consequence if you choose not to have your child participate.

PARENTAL PERMISSION

Permission to participate in a school field or excursion any time during the school year is given as follows, by the parent/guardian:

My child, _____ whose school of attendance is _____ has my permission to participate in a school field trip or excursion any time during the school year.

This parental permission is for the period of _____ through _____.

Signature of Parent/Guardian

Date

___ Please check here if instructions for special medical treatment for the student are on file in the school.

MEDICAL AUTHORIZATION

Should it be necessary for my child to have medical treatment while participating in this trip, I hereby give the Pasadena Unified School District personnel permission to use their judgment in obtaining medical service for the child and I give permission to the physician selected by the Pasadena Unified School District personnel to render medical treatment deemed necessary and appropriate by the physician. I understand that the Pasadena Unified School District has no insurance covering such medical or hospital costs incurred for my child and, therefore, any cost incurred for such treatment shall be my sole responsibility.

School _____

Date _____

Student Name _____

Emergency Telephone No. _____

Address _____

Print Parent Name _____

Parent Signature _____