

# Southwest Independent School District

## Parent Travel Consent Form

For School Sponsored Field Trip or Off Campus Activity

20 \_\_\_\_\_ - 20 \_\_\_\_\_

Your son/daughter has the opportunity to attend the following school sponsored field trip or off campus activity. Student must meet state and local eligibility requirements for extra-curricular travel. He/she will be required to make up any school work missed in his/her classes due to this trip.

Student: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ School: \_\_\_\_\_ Organization: \_\_\_\_\_

Parent's Busn. Phone: \_\_\_\_\_ Alternate Adult's Name \_\_\_\_\_ Phone: \_\_\_\_\_

Faculty Sponsor's Name: \_\_\_\_\_

### YEAR ROUND ACTIVITY

The above named student has my consent to travel to each event participated in by this organization this school year.

### INDIVIDUAL ACTIVITY

Site to be visited: \_\_\_\_\_

Date of departure: \_\_\_\_\_ Time: \_\_\_\_\_

Staying overnight at: \_\_\_\_\_

Approximate time and date of return: \_\_\_\_\_

The above named student has my consent to travel on this trip.

### MODE OF TRANSPORTATION:

SWISD Bus \_\_\_\_\_ Commercial Bus \_\_\_\_\_

Private conveyance driven by: Teacher \_\_\_\_\_ Parent \_\_\_\_\_ Student \_\_\_\_\_

Other: \_\_\_\_\_

I understand that the students will be chaperoned/supervised while enroute, participating and during unscheduled time and that normal precautions will be taken in their interest for safety and well being.

I agree to release Southwest School District and its employees and sponsors, from all legal responsibility from liability on this trip.

In case of emergency I give my approval and authorization for first aide treatment and any medical treatment by local physicians and/or hospital including surgical procedures. I agree to accept responsibility for payment of all charges incurred during this medical treatment.

Additional medical information or comments: \_\_\_\_\_

I understand that any student who does not conduct himself/herself properly will be sent home at the parent's expense.

This form must be signed and returned to the sponsor, teacher or administrator in charge of this group on the day before the day of departure. No student will be permitted to go on this trip who has not completed this form and returned it to the proper school personnel.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Signature of Student