

Douglas High School

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Brenyl Swanson, Principal
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CONSENT BY PARENT OR GUARDIAN FOR FIELD TRIP

In the course of present day education, the opportunity for a student to go on a field trip involving an absence from school is frequently arranged. However, written consent by the student's parent or guardian is required for a student under 18 years of age to take a field trip.

The district wants each student and each student's parent or guardian to understand the rules and procedures which will apply during the field trip, and to agree to the rules and procedures before giving consent. This permission slip, and your signature below, are a grant of authority for your student to attend the field trip, and your agreement that you understand and agree to the rules and procedures which will apply during the trip.

Students will be held responsible to the same student conduct expectations outlined in the Douglas High School Student Handbook, especially those related to Tobacco use/possession, and drugs and alcohol related offenses found on page 36 of the handbook.

Student attending field trips are expected to travel to and from the field trip destination and may not drive him/her or other students to the activity. If a student disregards this rule and attempts to provide his/her own transportation, (s) he/she will not be allowed to participate in the activity.

By giving my consent to participate in this field trip, I hereby release the Winston-Dillard School District and its employees from any claim which I or my child might have for injuries or damage suffered by my child resulting from the child's failure to obey and cooperate as instructed or as a result of the risks and dangers involved in this type of activity or field trip.

In the event my child needs medical treatment, I hereby consent and authorize the accompanying representative of the Winston-Dillard School District to permit such treatment on my behalf. I agree to be responsible for the cost of any medical services and to indemnify the school district from such expenses.

Name of Student _____ Home Phone Number _____
PLEASE PRINT NAME

Trip Destination _____ Trip Date _____

SIGNATURE OF PARENT/GUARDIAN _____
SIGNATURE OF STUDENT

Date Signed: _____ Date Signed: _____