# FIELD TRIP PERMISSION FORM

I hereby give permission for my son/daughter_____ to go on any and all trips and participate in any and all activities, related to the Science School, during this school year. I hereby completely hold harmless and release the Science School and Museum of Nature & Science and all of their agents, employees, officers, directors, affiliates, and all persons assisting with any phase of said trip from any and all claims and/or liabilities arising from or related to any of said trip, including but not limited to by reason of any accident or injury suffered by said child while on said trip or participating in such activities. I agree to indemnify and hold all of said parties harmless from all claims hereafter made by or asserted on behalf of said student.

Parents are to provide transportation where the Science School transportation is unavailable.

I understand that my child will be responsible for:

1. Following all safety instructions
2. Following all school rules
3. Being on time according to the day's schedule
4. Respecting all property

_____ _____
Parent/Guardian Signature Date

_____ _____
Emergency Phone Contact Relationship

In the event of a medical emergency I give permission for the Museum of Nature & Science to seek treatment for my child. **YES** **NO** (please circle one)

If no, please call: _____
Doctor's Name and Phone Number

**Please list phone number to confirm acceptance of permission form.**

(_____)_____
Area code phone number