



My child, _____, has permission to participate in the school-sponsored field trip to Sea World with the First Academy on **March 1, 2019**.

This trip is sponsored by Upper School Science.

General Field Trip Guidelines:

The undersigned has read and understands the Parent/Student Handbook of The First Academy and agrees to abide by the protocols and procedures provided therein. Further, as parent and/or legal guardian of the student participating in a TFA trip we, the undersigned, understand that our student must have this permission form signed and submitted to the Divisional Administrative office listed above before our student may participate in the off-campus trip. As parent and/or guardian, the undersigned understands that all TFA dress codes are enforced while our student participates in the off-campus activity (Spirit Wear will be worn). We understand that it is a student's privilege to participate in this trip and we fully support the school and its agents should it be necessary to enforce discipline for our student even if that means sending him/her home early.

Medical Information:

It is important that parents and/or legal guardians provide up-to-date information for each child. Please fill out the following information before returning this form to the division or department.

Parent Name: _____

Parent cell phone: _____

Emergency Contact (on case one parent cannot be reached)

Name: _____ Relationship: _____

Cell: _____

Please list any allergies or medical conditions that might require some type of intervention on this trip.

Medications should be given to the chaperone for keeping until needed.

The undersigned agrees to inform the sponsoring chaperone of any medications that must be given during the trip. The undersigned will supply such medications in the original pharmacy labeled packaging with only the dosage needed for the trip. In addition, the undersigned understands that supplying the child's teacher/chaperone with *emergency* medication, such as epi-pen or inhaler, for all trips and sports activities is the responsibility of the parent and/or legal guardian. It is further understood that school personnel are not held liable for the administration of the above medication or for its possible side effects.

Emergency medications must be provided from home for each trip.

Medication to be administered:

Name of medication: _____

Dosage: _____ Time needed: _____

Special instructions: _____

Possible side effects: _____

If the school cannot reach me, (parent/guardian) or the emergency contact, I/we give permission for school staff to call paramedics, physician, or dentist. If a life-threatening emergency exists, I/we give permission for school staff to call paramedics immediately and then contact me/us as soon as possible thereafter.

If the school cannot reach me (parent/guardian), or emergency contact, I/we authorize and consent to any x-ray examination, anesthetic, medical, dental, or surgical treatment, and hospital care which, in the best judgment of a licensed physician or dentist, is deemed advisable. I/we agree to assume the financial responsibility for emergency medical transportation.

Although the school desires to provide a safe and enjoyable time for all students, accidents can still happen. I/we understand that there are potential risks involved with participation in off-campus trips and their associated activities. In consideration of my child being allowed to participate in this event, I/we agree to assume responsibility for those ordinary and reasonable risks associated with travel and activities. I/we agree to release and hold harmless The First Academy, its affiliated organizations, employees, agents, and representatives, including volunteer and other drivers, from any and all claims arising from my child's participation that are in excess of the available liability or uninsured and/or underinsured motorist insurance coverage.

Parent Signature: _____ **Date:** _____

Parent name (print): _____