



Tantasqua Regional High School
 Brimfield-Brookfield-Holland-Sturbridge-Wales
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 PRINCIPAL

Mark Wood
 TECHNICAL DIRECTOR

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 GUIDANCE DIRECTOR

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 ASSISTANT PRINCIPAL

Field Trip Permission Form and Release

I, _____, parent/guardian of
 (parent/guardian name),
 _____, hereby give my permission for my
 (student's name)
 Child to attend _____
 (event or name of field trip)
 at/in _____ on _____.
 (location of event) (date of event)

It is understood that my child is attending this function at his or her own will. It will be the responsibility of the child to get assignments from teachers and make-up any and all work missed due to this event. In consideration of the permission extended by Tantasqua Senior High School to attend this activity, I hereby for myself, my heirs, administrators, and assigns waive and release any and all rights or claims of any nature against the Tantasqua Regional School District and any persons connected with this activity, their representatives, successors, and assigns for any and all injuries or damages which my child may suffer while taking part in this activity, and I agree to indemnify and hold harmless the District and all such persons against any claims arising there from. I understand that transportation for this activity is provided through the school by the Town of Sturbridge buses, First Atlantic Transportation, Varney's garage, or another hired company.

 Parent/Guardian Signature Date

If an emergency arises, it may become necessary to seek care in the way of medical attention for your child before you can be contacted. Such care can be provided only if you sign the authorization below.

In case of minor illness or injury, I, _____, parent/guardian of
 (parent/guardian name)
 _____ give my permission for the supervisor of my child to
 administer necessary treatment and/or first aid.

In case of an emergency, I hereby authorize the supervisor or the person in charge of the program/event to permit a physician, medical facility, or trained emergency technician to administer emergency care.

 Parent/Guardian Signature Date