

SHEEP

Permission Form

Your child's class needs permission to attend: _____

| | | | |
|-----------------------|--|-------------|--|
| <i>Date</i> | | <i>Time</i> | |
| <i>Location</i> | | | |
| <i>Cost</i> | | | |
| <i>Transportation</i> | | | |
| <i>Notes</i> | | | |

Please return this permission slip by: _____

I give permission for my child _____
to attend _____ on _____
from _____ to _____
to cover the cost of the trip. (Exact cash or check made payable to school.)

Enclosed is \$ _____

I am knowingly allowing my child to attend _____.

Should an emergency arise, the leaders or supervisors of the event have my permission to obtain any necessary medical care for my son/daughter, I agree to defend and indemnify SHEEP, its employees, and volunteers against any claim or action that might arise on behalf of myself or my son/daughter other than for willful, wanton, or reckless misconduct of SHEEP, its employees or volunteers. I also give my son/daughter/ward permission to be a passenger in a vehicle designated for this event which will always be driven by someone approved by SHEEP (23+ years of age or a parent).

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

Name _____ Phone _____

Parent/Guardian Signature _____ Date _____

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