

# Mountain View Montessori School

## Field Trip Form

### Permission to Participate and Authorization for Medical Services

This form is to be filled out completely and returned to the activities leader (SPONSOR) before the student is allowed to practice, compete, perform, and/or participate in extracurricular/co curricular activities.

Teacher(s)	Destination	Activity Date
Type of Transportation	Departure Time	Return Time
Student Cost	Additional Information	

The guardian/parent is reminded that every reasonable precaution will be taken to provide for the safety and care of the student. In the event of an accident requiring emergency care a reasonable effort will be made to notify the parent/guardian. The parent/guardian authorizes qualified and professional emergency treatment, hospitalization, and medical treatment in the event of such accident. A copy of this permission form will accompany the trip sponsor.

I also agree not to hold the school or anyone acting in its behalf responsible for any injury occurring to the student in the case of such extracurricular activities. I give permission for emergency medical transportation and treatment. I understand that any expenses incurred by such services are my responsibility.

The Mountain View Montessori School encourages student and teachers to learn and exemplify the virtues of Respect, Citizenship, Caring, Trustworthiness, Fairness and Responsibility. It is expected of all students' participation in extracurricular and fieldtrip activities to practice these qualities whether they are on or off campus. The parent/guardian and student do hereby accept, by agreement, the responsibilities related to the following statement of prohibited activities.

1. A person shall not by any conduct, act, force, threat, or deprive another of the exercise of personal rights, responsibilities, nor engage in any conduct which causes disruption of any lawful mission, process function of the school.
2. A student shall not intentionally cause or attempt to cause damage to school, private property, steal or attempt to steal school or private property. If a student should cause willful damage to school property, the school will seek restitution from the student and parent/guardian.
3. A student shall not intentionally cause or attempt to cause physical injury to another.
4. A student shall not possess, handle, or transmit any object that could reasonably be considered a weapon.
5. A student shall not possess, use, handle or be under the influence of any controlled substance. The use of a drug authorized by a medical prescription from a registered physician, and rule.
6. Any violation of local, state or federal laws on school trips will be subject to disciplinary action by the school.

**The PARENT/GUARDIAN of \_\_\_\_\_ who attends Mountain View Montessori School hereby gives permission for this student to participate in all extracurricular/ co curricular activities and fieldtrips throughout the year.**

**I wish to join the class on this fieldtrip (please check one)**

**Yes \_\_\_\_\_ Number Attending in addition to student \_\_\_\_\_ No \_\_\_\_\_**

Prescription medication(s) student is taking

Known allergies to medications

Home address

Work Phone Number

Emergency Contact Name

Emergency Contact Phone Number

Parent/Guardian Signature Date

Phone # you can reached on day of fieldtrip