



Happy Valley Union School District

Field Trip Permission Slip

I, _____, hereby give my permission for my child or ward, _____ to go to _____ (place) for the _____ (voluntary activity). I understand that my child or ward will leave on _____ at about _____ am, and travel by Bus (transportation); and is expected to return on the same day, at about _____ pm.

As stated in California Education Code Section 35330, I understand that I hold the Happy Valley Union Elementary School District, its elected or appointed officials, employees, agents, and volunteers harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity.

In granting this permission, I hereby expressly waive any claim for liability against the Board of Trustees or the Happy Valley Union School District, representatives and release same from any and all liability in connection with the above travel and/or activity unless the sole and only proximate cause of said liability is theirs.

I further do hereby authorize the employees of the Happy Valley Union Elementary School District, supervising the above activity and travel, as my agent to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, treatment and hospital care upon the advice of a physician or surgeon licensed under the provisions of the Medical Practice Act, no matter where such examination, anesthetic, diagnosis, treatment of care is performed or rendered.

It is understood that this authorization is given in advance of any specific examination, anesthetic, diagnosis, treatment or care being required or recommended. This authorization is given to provide authority and power on the part of any employee of the District to give specific consent to any and all such examinations, anesthetic diagnosis, treatment of care by the afore-described physicians or surgeons which they, in their individual or collective judgment, may deem advisable or recommended.

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective until the end of the school year.

I _____ would like to help chaperone this field trip.

Parent/Guardian Signature

Emergency #

Date

Student Name

Staff Responsible For Activity

LUNCH:

- My student will need a school lunch Milk only
- My student will bring a lunch from home
- Adult School Lunch. The cost is \$3.75 please send money with permission slip