

Date: _____

ACTIVITY SPECIFIC PARENT PERMISSION

I/We, _____ and _____

parent(s) or guardian(s) of _____ hereby grant permission to the Tucson Unified School District (TUSD) to allow my/our child to participate in the following school sponsored activity;

Description of Event

School

Teacher's Name

Date: _____ Leave time: _____ Return time: _____

Mode of Transportation: _____
School bus, school van, walking, private transportation

In case of serious illness or injury, I give consent for my child to be taken to our doctor's office or the closest hospital by school personnel or ambulance, and emergency care provided there, until I can be contacted.

My child is eligible for medical care at: _____
Insurance requirement or preference of hospital

In the event of an emergency, I can be reached at: _____
Home, work, cell phone

If you do NOT want your child to attend this school sponsored activity, please check this box

Signature of parent/guardian

Date

Additional Information:

PLEASE NOTE: If you will be a driver of a private vehicle for the above field trip, you shall produce a valid Arizona driver's license and insurance card for the vehicle that will be used for the trip. The district requires drivers carry \$15,000/\$30,000/\$10,000 liability--\$15,000/\$30,000 uninsured motorist automobile insurance coverage. This document will be copied for each field trip. There must be a seatbelt for each child riding in car. Children 12 or under may not sit in the front seat with an airbag.