Dyersburg High School
Parent Permission Agreement

Dyersburg High School is able to enhance educational opportunities of our students by offering extracurricular trips as a part of our school program. The students will be chaperoned by school personnel and will exercise reasonable supervision for your child. In return, your child will be expected to follow all directions of the chaperones and sponsors during the school trip.

We (the parents or guardians) give our permission for _____
(name of student)
to _____in_____on_____

_____: Parent/guardians **initials** to indicate itinerary was included and understood.

NOTE: INSURANCE COVERAGE IS NOT PROVIDED BY THE SCHOOL IN CASE OF ILLNESS OR ACCIDENT.

EMERGENCY TREATMENT INFORMATION

To all parents: It is required that you complete the information below so if your child requires a visit to the hospital while under the supervision of the school, this will allow the hospital to treat the injury.

Name: _____ Activity: _____ Sex: M_____ F_____

Grade:_____ Age: _____ Date of Birth: _____

Parent's Name: _____

Work Address: _____

Work Phone Number: _____

Home Address: _____

Home Phone Number: _____

Another Person to Contact: _____

Relationship: _____ Phone Number: _____

Insurance Name: _____

Policy and Group Numbers: _____

Allergies: _____

*In the case of a student discipline situation, a parent may be required to travel to the field trip location to pick up the student.

Parent’s Signature: _____

Last Updated 8/16/24