

Indiana State University Visit Field Trip

(CGHS Seniors only)

Date: _____

I hereby give my daughter/son _____
permission to visit **Indiana State University** with Center Grove High School on
Wednesday, October 10th.

It is understood that my child is still under school supervision but neither the school district nor those in charge shall be held responsible in case of an injury or accident. I hereby give permission, in the event of an accident, injury, or illness, for any and all necessary medical care to be administered to my child. I hereby release and hold harmless the Center Grove Community School Corporation from all liability related to all such treatment in an emergency situation.

Signed _____
Parent or Guardian

The bus will leave at 8:30 am for ISU and return by 2:30 pm. Please note that students will need to bring about \$10 for lunch on campus. If you would like to chaperone, please contact Angela Chaplin at chaplina@centergrove.k12.in.us (2 are needed).*If a student rides a bus home, they most likely will not return in time to catch the bus ride home. Please plan accordingly.**

*****PLEASE RETURN TO Angela Chaplin in Guidance
NO LATER than Friday, September 28th.**

There is only room for 50 students and this will be on a first come first served basis. Any forms turned in LATE will be subject to room availability on the bus.