

PARENT PERMISSION FORM

To the Principal of _____ School

I hereby request that _____ participate

In the field trip to _____

Time and Date _____

I agree to direct my child to cooperate and conform to directions and instructions of the supervisory personnel in charge of the field trip.

- ☐ I certify that my child is eight (8) years old or older or at least 4'9" in height and may use a seat belt in the back seat of the automobile.

Students Birthdate: Month _____ Year _____

- ☐ I certify that my child is not eight (8) years old or at least 4'9" in height. Therefore, I understand that my child **MUST be secured in an appropriate child passenger restraint (safety seat or booster seat) IN THE BACK SEAT OF A VEHICLE** and I must provide a safety seat or a booster seat to be used for his/her transportation as required under California law.

I understand that any expenses incurred for medical treatment of my child will be first submitted to my personal medical/dental insurance plans. Unpaid benefits can be submitted to Myers-Stevens as a secondary provider.

CONSENT FOR TREATMENT

(I), the undersigned parent or legal guardian of a minor, do hereby authorize a representative of _____ as agent(s) for the undersigned to consent to an x-ray examination,

name of school

anesthetic, medical or surgical diagnosis or treatment and hospital care that is deemed advisable by, and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provision of the California Medical Practice Act, on medical staff of an accredited hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment hospital care being required but is given to provide authority and power on the part of the above mentioned agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care that the above mentioned physician in the exercise of his or her best judgement may deem advisable.

Parent/Guardian Signature _____ Date _____

Yes _____ I offer to drive (if yes please fill out Appendix 6007B)

Name of parent: _____ Cell phone: _____

Yes _____ I offer to chaperone

Name of parent: _____ Cell phone: _____

CERTIFICATION AND AUTHORIZATION

I have offered to use my privately owned vehicle for transporting students to a school related activity. I certify that I possess a current, valid, unrestricted California Driver's License and that I currently have \$100,000/\$300,000 in automobile liability insurance coverage on the automobile to be used.

Name of Driver _____ Driver's License #: _____

Address of Driver: _____

City/Zip _____

Driver's Phone #: _____

Make of Vehicle: _____

Year/Model/Style: _____

Auto License #: _____ Total No. of Seat Belts: _____

Signature: _____

Persons who offer to use their privately owned vehicle for student transportation to school related activities should be aware that although there is a liability insurance policy for the Diocese, it is the individual driver's own insurance that must provide the coverage for him/her in case of an accident.

Copies attached: Valid, unrestricted California Driver's License; Declaration Page of Automobile Insurance Policy.

- I understand that the law requires seatbelts for each person riding in the car
- I understand that children under the age of eight (8) and under 4'9" MUST be secured in an appropriate child passenger restraint (safety seat or booster seat) IN THE BACK OF THE VEHICLE
- All children age 12 years and under should ride buckled up in a rear seat unless children under the age of 12 years already occupy all rear seats.
- For vehicles with air bags the National Highway Traffic Safety Administration recommends:
 - Children age twelve (12) and under should ride buckled up in a rear seat
 - If children twelve(12) years and younger must sit in the front seat, first ensure that they use seat belts and/or child restraints appropriate for their size and weight. Then move their vehicle seat all the way back. The child needs to be sitting with his/her back against the seat back, with as little slack as possible in the belt.

In order to be in compliance with the Safe Environment Project for the Diocese of Oakland no adult shall be in a car alone with minors. Therefore, all cars must contain at least two adults.

I will take every precaution to ensure the safety of all those in my vehicle.

Signature