

PARTICIPATION IN A SCHOOL-SPONSORED FIELD TRIP

Name and description of the trip: 5th Grade Field Trip Experience to Cross Timbers Middle School

Date of the trip: February 5, 2025

prepare their

Brief itinerary : Fifth graders will experience one of our distransition to sixth grade and receive middle school information (e.	
Mode of transportation: District buses	
Origination point: Glenhope Elementary School	
Destination point : Cross Timbers Middle School	
Number of students anticipated: 114	
Number of adult employees and chaperones: 6	
Cost per student (if applicable): \$0	
Student should bring: Nothing	
☐ My child may participate in this activity	
☐ My child may not participate in this activity	
Name of student:	
Parent/Guardian signature:	
In case of an emergency, please contact one of the following:	
1 Name	
Name 2	Phone
Name	Phone

Revised 6/9/2022



PARTICIPATION IN A SCHOOL-SPONSORED FIELD TRIP CONSENT & RELEASE FORM

<u> </u>	idents to participate in school-sponsored field trips and that it ardians are required to provide a signed consent and release
I,(parent/legal g (student). I hereby give a participate in the 5th grade Field Trip Experience to	uardian name) am the parent or legal guardian of my consent for (student) to travel with and Heritage Middle School.
Student Injury I understand that while student safety is a high responsible for medical costs associated with a student safety.	priority for the District, under state law, the District is not ent's injury.
in transportation provided by the District to and parent/guardian presents a written request to the parent, with	adents who participate in a field trip shall be required to ride from the event. Exceptions may be made if the student's principal three (3) days before the scheduled trip, requesting the another person designated by the parent, or the student be District shall not be liable for any injuries that occur to not provide.
release and waive all claims for medical expenses and hold harmless the District, its Trustees, employ made against it or them on behalf of my child. I	my personal representatives, successors, and assigns, hereby s, loss of services, or other claims, and I agree to indemnify yees, and agents (except charter bus services) from all claims also agree to indemnify and hold harmless the District, its ade by third parties against it or them, which result from my
I understand that the District, its Trustees, employeernmental immunity, which it or they have up	oyees, and agents are not waiving any sovereign or nder Texas law.
•	voluntarily and with full knowledge of its significance. This understand that if I choose for my child not to participate in ded for my child at the campus.
Parent/Guardian signature:	Date: