



## Propel Charter School-MONTOUR

I \_\_\_\_\_ give permission for  
(Name of Parent or Legal Guardian)

\_\_\_\_\_ to attend the following  
(Name of student)

trip \_\_\_\_\_  
(Name and date of trip)

Permission slip must be returned by: \_\_\_\_\_.

Transportation will be provided by:  
\_\_\_\_\_.

I understand that a Propel School Nurse may or may not be present while on this trip and due to Pennsylvania State Mandates my child's school medication **MAY NOT** be sent with the teacher if the nurse is unable to attend the field trip.

My child has the following medical condition that may interfere with his/her participation on the trip: \_\_\_\_\_.

I \_\_\_\_\_ give permission for my child  
(Name of parent or legal guardian)

to attend this trip **WITHOUT** their medication.

Medication that my child takes \_\_\_\_\_.

In the event of an emergency – I understand that the leaders will make every effort to reach me but in the event that emergency treatment is needed, I give the trip leaders the right to transport and authorize medical treatment on behalf of my child.

Parent/ Guardian can be reached at the following numbers on the date of the field trip:  
\_\_\_\_\_.

My child's physician is: \_\_\_\_\_.

My child's physician's phone number is: \_\_\_\_\_.

Emergency contact: \_\_\_\_\_  
(Name and phone number)

My child and I have read and understand Propel's Code of Conduct Booklet. He/she agrees to abide by these rules while on the trip.

Parent/legal guardian does hereby covenant and agree to release and hold harmless Propel Charter School from and against any and all liability, loss damages, claims or actions (including costs and attorney fees) for bodily injury and /or property damage, to the extent permissible by law, arising out of participation in this field trip.

\_\_\_\_\_  
(Parent/ Guardian signature)

\_\_\_\_\_  
(Date)