Worthington City Schools
Field Trip Form

As the parent/guardian of _____, I understand that my child is to take the school trip listed below. I give permission for my child to be involved in the trip, and I release the Worthington City School Board of Education and school employees from any and all liability of any kind which may arise during or relating to the trip except liability for damages or injuries caused by the sole negligence of the Worthington City Schools.

Please check √ A or B below, and fill in the blanks.

A. ____ Emergency Medical Authorization: Parent Home Phone: _____

Parent Work Phone: _____

When/if parent cannot be reached:

Doctor's Name _____Phone:_____

Preferred Hospital: _____

Any Special Medical Needs: _____

B. ____ I do **NOT** give my consent for emergency medical treatment. The school should take no action or

_____

Date: _____ **Parent/Guardian Signature**:_____

Note: This form MUST be in WCS staff member's possession during all trips.

Thomas Worthington Field Trip Permit
Student Responsibility

The **Senior Class** is going on a student field trip to Cedar Point for the Senior Trip on Thursday, May 21st. Buses will depart at 8:00 am and return to Thomas Worthington at 10:00 pm. This permission form MUST be turned in to Mr. Brienza in room 024 or to Mrs. Volpe in Central Office.

I understand that I will follow the rules laid out in the student handbook and behave appropriately while on the senior trip. Since this trip will take place after senior exams, it is not necessary to get permission from teachers.

Student Signature _____

Per.	Teacher Initials	Concerns, if any		Per.	Teacher Initials	Concerns, if any
1st				7th		
2nd				8th		
3rd				9th		
4th				10th		
5th				11th		
6th				12th		