

Laurel Oaks Student Field Trip Permission Slip

Student: Program:

Instructor: Instructor Phone:

Date: From To Time: From To

Location of Trip

Specific Instructions about Field Trip:

This permission slip is to grant parent/custodial permission to allow their student to complete in-car driver training with TEAM Driving School during the school day.

The undersigned (parent, legal guardian or legal custodian (circle whichever is applicable)) of the named student and such student hereby consent and grant permission for such student to participate in the field trip or field experience indicated above.

The undersigned recognize that the potential risk of injury to the person or property of such student by participation in the trip or field experience may or may not be of different character fully aware of such risks, it is our desire that such student participate in the designated event, we release the Great Oaks Institute of Technology and Career Development Board of Education and its employees, agents and contractors from all liability of whatsoever character, including but not limited to injuries to person or property arising out of resulting from or in any way connected with participation by such student therein.

Signature of Parent, Guardian, Custodian

Date

Emergency Contact Number

Cell Phone Number

Signature of Student

Date