

CAMPBELL CHRISTIAN SCHOOLS
RELEASE AND ASSUMPTION OF RISK

This form must be signed and returned to Campbell Christian Schools before students are permitted to go on a field trip.

Student Name _____ Grade _____ Teacher _____

Has permission to participate in the activity shown below:

Activity _____ Destination _____

Yes I can Chaperone _____ Chaperone Name _____

Yes I can Drive _____ **Only provide the information below if you will be driving for this field trip.** For driver/chaperone requirements see attached. CCS pays for the number of chaperones required for safety.

Parent/Guardian Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

My car has _____ seat belts for children and _____ for adults. *(Do not count the driver in this number.)*

Note: Current driver's license and insurance information must be verified in the office **BEFORE EACH** field trip. **Children may not be placed in vehicles until this is completed. Call 370-4900, ext. 221 if you need more information.**

By my signature I indicate that I am aware that during any field trip or excursion, away from the school, certain dangers may occur including, but not limited to, the hazards of accidents or illness in places without medical facilities, hazards created by the forces of nature, and hazards of travel by air, train, bus, automobile, and other means, including walking.

Further, in the event of illness or injury, I do hereby consent to whatever x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary for the individual in the best judgment of the attending physician, surgeon or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

I understand and do hereby assume all of the above-mentioned risks and will hold Campbell Christian Schools and its representatives harmless from any and all liability whatsoever which may arise out of or in connection with a trip or participation in any activities arranged for the participant by Campbell Christian Schools. The terms thereof shall serve as a release and assumption of risk for my heirs, executor and administrators and for all members of my family.

Further, I understand that this activity is not a necessary part of the program of Campbell Christian Schools and participation in such is purely voluntary on the part of the student and his or her parent or guardian.

Signature of Parent or Gaurdian _____ Date _____

-----CUT HERE-----

Activity _____ Destination _____ Date _____

Departure Time _____ Approximate Return _____ Means of Transportation: Bus _____ Car _____

Special Items Needed: The law requires students under 6 or under 60 pounds to have a car seat. Parents must provide this to the school. Your child's car seat must be left in the classroom on the day of the field trip. Your child may not attend without this. We are unable to make exemptions.

Food/Lunch Instructions _____

Additional Information _____