



The Echelon Academy

FIELD TRIP PERMISSION SLIP

Must be filled out in pen

Name of Participant _____

Field Trip to _____ on (date) _____

Place leaving/returning _____ Time leaving/returning _____

Mode of Transportation _____

Parent Name _____ Day Phone _____
Cell Phone _____

Parent Name _____ Day Phone _____
Cell Phone _____

Emergency Contact _____ Day Phone _____
Cell Phone _____

I, the undersigned participant (if 18 years of age or older), or parent or guardian of the above named student at The Echelon Academy, hereby agree that the named participant be allowed to participate in the activity(ies), class(es), or event(s) described on this registration form. I have been informed of the risks involved in such participation, including but not limited to, a social/public event and environment with non-Echelon adults and students, temporary and/or permanent injury to the property, person and/or death because of on account of such participation. On behalf of myself and the above named participant, I hereby waive any and all claims for damages of any kinds whatsoever against The Echelon Academy, LLC, its board members, staff, and volunteers, arising out of, or incidental to participation in any of the above described activity(ies), class(es), or event(s). I further agree to indemnify, hold harmless, and defend The Echelon Academy, its board members, staff, and volunteers against any claim for damages or any kind whatsoever arising out of, or incidental to the participation in the above named activity(ies), class(es), or event(s).

I further authorize a qualified physician to render emergency medical treatment or care he/she deems necessary for the participant because of illness or accident which occurs during the course of any of the above-described activity(ies), class(es), or event(s).

I, the undersigned parent/guardian agree to abide by all rules and regulation of The Echelon Academy listed on The Echelon Academy Registration Form and Parent Handbook. I understand a violation of these rules may require my student/child leave the field trip early and/or lose my privileges to attend future field trips with The Echelon Academy.

Parent/Guardian Signature _____ Date _____

I, the undersigned participant agree to abide by all rules and regulation of The Echelon Academy listed on The Echelon Academy Registration Form and Parent Handbook. I understand a violation of these rules may require I leave the field trip early and/or lose my privileges to attend future field trips with The Echelon Academy.

Participant Signature _____ Date _____
