



# FIELD TRIP PERMISSION SLIP

## Participant, Parent or Guardian Release and Indemnity

Throughout the year students will be participating several field trips. In place of asking for a new permission slip for each trip, we are providing this slip to apply to all field trips. **Notices describing each individual trip will be sent home/emailed prior to each field trip, to include dates, times, fees (if any) and destinations.** *If there is a specific trip that you do not wish your child to participate in, you may elect to opt out by notifying your child's instructor and/or the director at that time.*

I request that (Student's Name-PLEASE PRINT): \_\_\_\_\_ be allowed to participate in all field trips arranged by SAY Sí including special program trips that require travel and overnight stays.

I (Parent/Guardian Name-PLEASE PRINT): \_\_\_\_\_ acknowledge that participation in the field trips of SAY Sí is not mandatory and I may choose to keep my child at home during the days and times of those trips. I further acknowledge that no alternate activity need be provided.

### Medical Consent/Release:

If any emergency medical procedures or treatment are required during any of the field trips scheduled as part of SAY Sí programming, I give consent for SAY Si representatives to seek medical attention for my child in the event of a medical emergency while on the trip.

I hereby accept any financial responsibility for any and all medical treatment necessary to be administered to the above named child in the event of an accident, injury, sickness, etc. and agree to cooperate with SAY Sí, its employees or officers, its insurance carriers or other related entities to ensure payment for the cost of treatment.

### Release and Indemnity:

In consideration of my child's ability to participate in SAY Si sponsored field trips, I and the above named minor child assume all risks and responsibilities for all injuries that may result from said participation in the SAY Sí sponsored field trips and hereby release all claims, damages, and liability which I and the above named minor child and our respective heirs, executors, administrators and assigns ("Releasers"), may have against SAY Sí and its directors, employees, officials, teachers or representatives ("Releasees"), for any and all injuries or damages of any kind whatsoever in connection with or as a result of the above named minor child's participation in the SAY Si sponsored field trips.

RELEASORS AGREE TO INDEMNIFY, DEFEND, AND HOLD RELEASEES HARMLESS FROM ANY INJURY (AND ANY RESULTING OR RELATED CLAIM, ACTION, LOSS, LIABILITY, OR REASONABLE EXPENSE, INCLUDING ATTORNEY'S FEES AND OTHER FEES AND COURT AND OTHER COSTS) ARISING FROM, IN CONNECTION WITH, OR RELATED TO, ANY PARTICIPATION IN ANY SAY SÍ SPONSORED FIELD TRIPS BY THE ABOVE NAMED MINOR CHILD.

Student Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_