



Tigard-Tualatin School District
Parent/Guardian Permission & Liability Release Form

Student Name: _____ Grade: _____
School: TJHS Teacher: _____ Home Phone: _____
Address: _____
Parent/Guardian Name: _____ Work Phone: _____
Parent/Guardian Name: _____ Work Phone: _____
Emergency Contact (Other Than Parent/Guardian): _____
Emergency Phone: _____
For swimming activities:
Please identify if your child is a "swimmer" _____ or "non-swimmer" _____. *we will not be swimming*
**Non-swimmers are required to wear life vests at all times and stay in the shallow areas.*

ACTIVITY: Oaks Park Physics field trip
Date of Trip: Friday, May **Location of Trip:** Oaks Amusement Park
Departure Time: 8:15 **Return Time:** 2:00 **Transportation Type:** Yellow School Bus
Notes: _____

I, the parent of the above named student, grant permission for my child to participate in the above-described activity.

In consideration of my child's participation in the aforementioned activity, I (we) waive and release any and all rights and claims for losses and damage that I (we or our child) may have against Tigard-Tualatin School District. This release shall be binding upon our representative, successors and assignees.

Furthermore, I (we) recognize that providing personal accident insurance and payment of medical expenses our child may sustain due to participation in activities is my (we or our child's) responsibility.

In the event that my child may require(s) emergency medical treatment while participating in the previously mentioned activities, I hereby authorize my child to receive emergency medical treatment as may be necessary, including transport by ambulance.

Dated this _____ day of _____, _____

Signature of Parent/Guardian: _____