



Field Trip
Permission Slip

Participant's / Child's Name:

Parent/Guardian's Name:

Home Phone:

E-Mail:

I, (Parent/Guardian)

_____, grant permission for my child, to participate in this field trip with Horizons Tutoring to

_____ on _____

And return at: _____

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor participant. I agree on behalf of myself, my child named herein, or our heirs, successors and assigns, to hold harmless the organizer its officers, directors and agents, and representatives associated with the event, from any and all actions, claims, demands, damages, costs, expenses and all consequential damage arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection there within, for an event that requires transportation, this activity will take place under the guidance and direction of employees with Horizons Tutoring and/or volunteers.

A brief description of the activity follows: _____

Location of event: _____

Date and time of departure: _____

Date and time of return: _____

Mode of transportation to and from event: _____

Signature Parent: _____ Signature Tutor: _____