



Corvallis School District  
PARENT PERMISSION FORM

F.B. – Trips to Noyes Property (2 blocks from CVHS) research / data collection

Bldg. Admin. or Designee (Teacher) Signature: Dan Bregar

Various

1<sup>st</sup>, 3<sup>rd</sup>, 7<sup>th</sup> periods

Day/Date of Activity

Time of Activity

\_\_\_\_\_ (student) has my permission to participate/attend the above said activity by: ☐ bus; ☐ van; ☐ private car; ☐ foot; ☐ bicycle; to various locations for the purpose of participating in the said activity. I agree to hold Corvallis School District, its officials, agents and employees harmless against any claim for injury or damage except in those cases where the acts of Corvallis School District, its officials, agents, and employees have been determined to be negligent by a court of competent jurisdiction. I, also, hereby authorize any duly authorized doctor, emergency medical technician, paramedic, nurse, hospital or other medical facility to treat said minor for the purpose of attempting to treat or relieve any injuries received by said minor while participating in or observing at the activity named above. **The above listed student has the following conditions/allergies/special needs:** \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Emergency Contact Person

\_\_\_\_\_  
Emergency Phone Number