



Corvallis School District

PARENT PERMISSION FORM

LBCC Career Cruise – Albany Campus

Activity

Dan Bregar/Adam Kirsch

Bldg. Admin. or Designee (Teacher) Signature

Wed., September 23, 2015

Day/Date of Activity

11:15 AM – 3:05pm

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

Instructions for School: Make copies of this form (after signed by parents) for teachers and/or drivers to take on trip.

ACTIVITY REMINDER FOR PARENTS/GUARDIANS

Activity

Student

Teacher

Day/Date

Departure Time

Return Time

Travel Arrangements: ☐ Bus ☐ Van ☐ Private Car ☐ Foot ☐ Bicycle

Additional Activity Information: Students are asked to bring a sack lunch with them for this trip. We will make every effort to return before the end of school. Students are to come to the classroom by 11:20 AM and will need to eat lunch on the bus.

Property: forms/parentpermission (6/9/06)