NEWTON PUBLIC SCHOOLS <u>DAY/EXTENDED LONG DISTANCE TRIP</u> <u>CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT</u> <u>Parent</u>

I/We the undersioned parent(s) or gua	rdian(s) of	, a
I/We, the undersigned parent(s) or guardian(s) of		
I/We hereby authorize Newton's emplact on our behalf in authorizing and coif he/she becomes ill or is injured while Authorization and Consent may be preat such time as emergency medical car discharge Newton from any and all class of the decision to provide emergency	onsenting to emergency le participating in the Fi esented to the appropria re is required. I/We her aims of any nature what	medical care for said minor eld Trip. This te emergency medical staff eby RELEASE and
Signature of Parent or Guardian	Date	Relationship
Signature of Parent or Guardian	Date	Relationship

THIS FORM MAY NOT BE ALTERED Revised: 9/02

The superintendent reserves the right to cancel any field trip up until the time of departure.