



Camp Infinity - Field Trip Parent Consent Form

I hereby give permission for my child _____ to go to
_____ on _____. Transportation
will be arranged by _____.

Reporting Time to School: _____

Estimated Departure Time: _____

Estimated Return Time: _____

Adults in charge: _____

In granting this permission, I assume full responsibility for any damage to person or property caused by my child. I agree that if it is determined that my child needs medical or dental treatment; I will be responsible for any such treatment determined by physician or dentist.

Parent Signature & Date

Work Phone: _____ Home Phone: _____ Other Phone: _____

Please Note: If your child is not joining the Field Trip, please do not send the child to the camp as no activity will be happening on that day.