

TEMPLETON SECONDARY SCHOOL CONSENT / ACKNOWLEDGEMENT OF RISK (PARENT / GUARDIAN)

CONSENT	AND ACKNOW	/LEDGEME	NT OF RIS	K			
Destination ,	/ Activity / Progra	am: Ashland	Oregon Sh	akespeare Festival	Date	s: <u>Mon S</u>	Sept 16 – Fri Sept 20, 2019
activity, and activity is ta	d may occur with aking place. By al	hout fault on t allowing your	the part of t child to par	the student, school boa	oard, its empl ty, you are ag	loyees or a	k is inherent in the nature of this agents, or the facility where the hat the activity described above
	My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service provider's administrators, instructors, and supervisors over all phases of the program/activity.						
	In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her exclusion from further participation, or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.						
	I acknowledge that the trip supervisors may secure transport to emergency medical services as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services.						
I give permi	assion for (Name c	of student)			to par	rticipate ir	n the field study described above.
				injury due to accident w			
Name (Plea	se print):			Relationship t	to Student:		
Signature: _				Date:			
				ns which would prevent are of surrounding your		om fully p	participating in this trip, or any
Fees, Fines	and Hardship no	student shall	l be denied a		cipate in an a	activity be	ce with Board policy JN <i>Students</i> ecause of an inability to pay fees. I above.
TEACHER PERMISSION							
				Please initial the form tent absent from class.	to indicate that	at the stud	lent has notified you of the above
DAY 1 Bo	sefore School Class	1	2	Lunch	3	4	After School Class
DAY 2							