



OREGON EPISCOPAL SCHOOL

1869

## Parent or Guardian Permission Form

I give \_\_\_\_\_  
Student's Name

permission to travel to the Camp Hancock Field Station, Fossil, Oregon, and to participate in the 5<sup>th</sup> Grade Trip of Oregon Episcopal School.

- **Trip Begins:** 8:30 AM on Monday, May 16, 2005
- **Participants return to Oregon Episcopal School:** Approximately 2:30 PM on Friday, May 20, 2005.

Oregon Episcopal School will provide transportation.

Should an accident or other medical emergency occur during the trip or activity, and the responsible leader is unable to reach a parent or guardian for medical authorization, I hereby give my consent for the responsible leader to authorize necessary hospitalization or treatment, including injections, anesthesia, surgery and medications.

I agree to be responsible for all debts not covered by the school which are incurred by the student during the trip and activity, and for all the expenses not covered by insurance that are incurred as result of any accident, illness or medical emergency involving the student.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2005.

Name of Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

**Signature of Parent or Guardian:** \_\_\_\_\_

Telephone numbers where parent or guardian or parent can be reached:

Home	
Work	
Cell	
Other	