

**CHAMLIAN ARMENIAN SCHOOL**  
**FIELD TRIP PERMISSION**

We (parent or guardian) of \_\_\_\_\_ give permission for our child to participate in a school sponsored field trip to \_\_\_\_\_, on \_\_\_\_\_. Time of leaving school \_\_\_\_\_. Approximate time of returning \_\_\_\_\_.

It is understood that he/she will be under the supervision of \_\_\_\_\_, a teacher/staff member of Chamlian Armenian School, and that he/she will travel to and from the place designated by way of \_\_\_\_\_.

The expense involved will be \_\_\_\_\_ per student.

I understand that, under Section 35330 of the California Education Code, all persons making such a field trip or excursion shall be deemed to have waived all claims against Chamlian Armenian School or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion.

In case of an emergency during the field trip, persons listed below can be reached during the above hours at:

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_

Alternate phone (if available) \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_

Alternate phone (if available) \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

(Parent or Guardian)

We accept full responsibility for our child and grant permission to the person in charge to seek first aid treatment in case of emergency.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Telephone No.