FRUITVALE INDEPENDENT SCHOOL DISTRICT Extracurricular Field Trip - Parent Notification & Permission Form

The following student trip has been requested by the sponsor/coach/teacher whose signature appears below. It has been approved by the building principal and the superintendent of schools as indicated by their signature.

Signature of requesting sponsor/coach/teacher		Date
Principal Signature/Date	Supe	rintendent Signature/Date
Purpose of student trip:		
Date of Trip: Class/Org	anization:	
Trip Supervisor:	Contact Info	rmation:
Trip Destination: D	eparture Time:	Return Time:
Method of Transportation:Bus	Other School Vehicleg passengers)	*Private Passenger Car
Insurance of Private Passenger Car Verified by	·	
Student Name:	(Vehicle Owner Signature/Date)	
Student Date of Birth:	Age:	
Parent Address:	C	ell Phone Number:
Emergency Contact Information:		
Family Doctor and Contact Information:		
Preferred Emergency Room:	Hospitaliz	zation Insurance with:
Birthdate of Insurance Holder:		
I hereby certify that I am the parent/guardian of the above (Texas School Law: Sub-Chapter B, Sect. 21.031).		ne/she is a legal resident of Fruitvale ISD
In the event of a serious illness or accident at school or a the proper school officials of Fruitvale ISD to secure me		e immediately contacted, I hereby authorize
I also agree to not hold Fruitvale ISD, its employees, or any costs incurred in securing medical assistance for san		sickness or accidents involving my child or for
I,, auth	norize	to participate in the school
I,, authorized (Parent/Guardian) trip using the transportation identified on this for	(Student Name) Orm.	
Parent Signature: (Sponsor must make copies of permission slips and		

