## **Informed Consent**

## Maria Montessori Academy Parental Permission Slip

This is an Informed Consent Form for Minors, which identifies risks of participating in the Maria Montessori Academy Field Trips, and a Consent for parents/guardians.

2017 school year. Please take a information regarding specific field	les will be attending several educational and recreational fieldtrips during the 2016-moment to initial the fieldtrip(s) that you would like your student to attend. Further dtrips will become available as the date draws nearer. If you later decide you do no fic fieldtrip(s), it is your responsibility to inform the school and your student's teache
January 11, 2017	Animal Autographs Ogden Nature Center
April 26, 2017	Children's Discovery Museum Gateway, SLC
along public roadways and integrand what is required, including	nt's participation in this activity, which involves traveling by foot on sidewalks resections. Students are expected to familiarize themselves with the activity rules of conduct for the activity. Students are expected to follow proper g safety procedures as outlined by the activity supervisors, plus any ed school employee.
	Student Consent
I, participate in the activities, will fol directions given by an authorized	, acknowledge that I have familiarized myself with what is required to low the rules of conduct, will follow the operating procedures, and will follow any school representative.
Signature of Student	
	Parental Consent
The undersigned, the legal guard Maria Montessori Academy unde school's junior high library days, o	r eighteen years of age, in consideration of student's participation in each of the
physical and or emotional harm o	is activity may involve moderate to strenuous physical activity and may cause r distress to participants. There may also be associated health and safety risks. I any known heart, respiratory or other health problems that could prevent student the activities.
Consent is expressly given, in the opinion of the attending physician	e event of injury, for any emergency aid, anesthesia and/or operation, if in the in, such treatment is necessary.
	stand the contents of the foregoing language and I specifically intend it to this activity for each of the scheduled days.
Parent Name	Date
Signature of Parent	(Parent or legal guardian signature)
	(i diciti di logal guardiari signature)