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.

2018 school year. Please take a information regarding specific fiel	sses will be attending several educational and recreational fieldtrips during moment to initial the fieldtrip(s) that you would like your student to attend dtrips will become available as the date draws nearer. If you later decide yfic fieldtrip(s), it is your responsibility to inform the school and your student	Further you do not
May 2, 2018	Ogden Eccles Dinosaur Park Ogden, Utah	
sidewalks along public roadwa the activity and what is require	nt's participation in this activity, which could involve traveling by foor ys and intersections. Students are expected to familiarize themselved, including rules of conduct for the activity. Students are expected including safety procedures as outlined by the activity supervisors, placed school employee.	es with to follow
	Student Consent	
I,	, acknowledge that I have familiarized myself with what is requirellow the rules of conduct, will follow the operating procedures, and will follow school representative.	red to ow any
Signature of Student		_
	Parental Consent	
The undersigned, the legal guard Maria Montessori Academy unde to this consent.	ian of (hereinafter "student"), a sture is in the result of the r	udent at eby agree
physical and or emotional harm of	is activity may involve moderate to strenuous physical activity and may can distress to participants. There may also be associated health and safety any known heart, respiratory or other health problems that could prevent the activities.	risks. I
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 a such treatment is necessary.	the
	stand the contents of the foregoing language and I specifically intention this activity for each of the scheduled days.	d it to
Parent Name	Date	
Signature of Parent	(Parent or legal guardian signature)	