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.

The Early Childhood classes will be attending several educational and recreational fieldtrips during the 2017-2018 school year. Please take a moment to initial the fieldtrip(s) that you would like your student to attend. Further information regarding specific fieldtrips will become available as the date draws nearer. If you later decide you do not wish your student to attend specific fieldtrip(s), it is your responsibility to inform the school and your student's teacher.

_____ **May 17. 2018 Oaklawn Park**
1200 E 2500 N, North Ogden UT

Injury may result from a student's participation in this activity, which involves traveling by foot on sidewalks along public roadways and intersections. Students are expected to familiarize themselves with the activity and what is required, including rules of conduct for the activity. Students are expected to follow proper operating procedures including safety procedures as outlined by the activity supervisors, plus any directions given by an authorized school employee.

Student Consent

I, _____, acknowledge that I have familiarized myself with what is required to participate in the activities, will follow the rules of conduct, will follow the operating procedures, and will follow any directions given by an authorized school representative.

_____
(Signature of student)

Parental Consent

The undersigned, the legal guardian of _____ (hereinafter "student"), a student at Maria Montessori Academy under eighteen years of age, in consideration of student's participation in each of the school's junior high library days, do hereby agree to this consent.

I recognize that participation in this activity may involve moderate to strenuous physical activity and may cause physical and or emotional harm or distress to participants. There may also be associated health and safety risks. I state that the student is free from any known heart, respiratory or other health problems that could prevent student from safely participating in any of the activities.

Consent is expressly given, in the event of injury, for any emergency aid, anesthesia and/or operation, if in the opinion of the attending physician, such treatment is necessary.

I have carefully read and understand the contents of the foregoing language and I specifically intend it to cover student's participation in this activity for each of the scheduled days.

Name_____**Date**_____

Signature_____
(Parent or legal guardian signature)