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.

Please take a moment to initial the specific fieldtrips will become available.	ng several educational and recreational fieldtrips during the 2019-2020 school year. the fieldtrip(s) that you would like your student to attend. Further information regarding the date draws nearer. If you later decide you do not wish your student to bur responsibility to inform the school and your student's teacher.
February 24, 2020	Weber State Storytelling Festival Eccles Conference Center and Peery's Egyptian Theater 2415 Washington Blvd., Ogden, UT 84401
along public roadways and into and what is required, including	nt's participation in this activity, which involves traveling by foot on sidewalks ersections. 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 sed school employee.
	Student Consent
I,	, acknowledge that I have familiarized myself with what is required to llow 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,	ian of (hereinafter "student"), a student at r eighteen years of age, in consideration of student's participation in each of the do hereby agree to this consent.
physical and or emotional harm of	is activity may involve moderate to strenuous physical activity and may cause or 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 n, 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.
Name	Date
Signature	
-	(Parent or legal guardian signature)