

# School Field Trip Waiver Agreement

I, the undersigned parent/legal guardian of  (student's full name), grant permission for my child to participate in the field trip organized by  (school/organization name) on  (date).

## Assumption of Risk & Release

I acknowledge and understand that participation in the field trip involves potential risks, including but not limited to transportation, activities, or unforeseen events. I hereby release and hold harmless the school, its staff, volunteers, and representatives from any and all liability, claims, or demands which may arise from or in connection with my child's participation in the field trip.

## Medical Authorization

In the event of an emergency, I authorize the school authorities to obtain necessary medical treatment for my child. I understand that I am responsible for any medical expenses incurred.

## Emergency Contact Information

Parent/Guardian Name

Phone Number

Alternate Emergency Contact

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Parent/Guardian Signature

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Date

**Note:** This agreement must be signed and returned to the school before the field trip date.