

FAITH BAPTIST SCHOOL
 4105 PLANK ROAD, FREDERICKSBURG, VA 22407
 540-786-4953
PARENTAL AUTHORIZATION
AND ACKNOWLEDGEMENT OF RISK FOR FIELD TRIP

IMPORTANT DIRECTIONS: (1) Use one form per trip. (2) Complete the school portion (top half) of form, (3) Duplicate one form per student, and (4) Send a copy home for parent and student signatures.

TO BE COMPLETED BY THE SCHOOL	Date(s) of Trip: May 26, 2010	Destination: Pope's Creek Plantation
	Activities Planned: Visit Washington's birthplace and picnic lunch. Short hike along Pope's Creek	
	Departure Time: 8:40 a.m.	Return Time: 2:30 p.m.

TRANSPORTATION BEING PROVIDED (Check all that apply)

- Walking School Bus Leased Vehicle Commercial Carrier

DRIVERS OF PRIVATE OR LEASED VEHICLES (Check all that apply)

- Parent Other Adult Teacher or Staff Member

RISK RELATED (Check all that apply)

- Amusement or Theme Park Other: _____
(List activity)

Pupil Agreement

While participating in this field trip. I will accept responsibility for maintaining good conduct and appearance, and I will follow directions at all time.

_____ _____
Signature of Student Date

PARENTAL AUTHORIZATION AND ACKNOWLEDGEMENT OF RISKS

I understand that participation in this field trip is voluntary, that it is not required, and that it exposes my child to some risk(s). I also understand that the trip may include amusement activities and that participation in any amusement activities will expose my child to some risk of injury or even death. I have read and understand the description of the field trip (attached) and authorize my child to participate in the planned components of the field trip to the extent indicated by my signature below. I also understand that participation in the field trip will involve activities off school property; therefore, neither Faith Baptist Schools or its employees and volunteers, will have any responsibility for the condition or use of any nonschool property.

PARENT PERMISSION (Check all that apply)

- Participation in all aspects of this trip.
 Participation in all aspects of this trip, except as follows: _____

I give permission for _____ to participate in this field trip.

_____ _____
Signature of Parent Date

IMPORTANT NOTICE: Faith Baptist Schools (FBS) cannot be responsible for reimbursements to parents of students for money submitted as advance payment (e.g., for transportation or hotels) for any field trip that FBS cancels.

TO BE COMPLETED AT HOME