EPISCOPAL DAY SCHOOL 2019-2020

Field Trip Transportation Authorization

Child's Name:	Date of Birth:
This serves as written acknowledgement the making special transportation array volunteers, bus, or walking) for field trips.	
Field Trip Transportation Authorization:	
I am the parent or legal guardian of the permission for my child, who is enrolled a walk to and from the school or to be transperson the school during field trips or other a	nt Holy Trinity Episcopal Day School, to ported by staff and/or volunteers to and
I will provide an approved child restraint of for travel in a vehicle or bus on the field to conform to current state law. I will be restraint device is securely installed into the and realize that may require my presence	ip dates. All children will be restrained responsible for ensuring that my child's e designated vehicle on field trip dates
I will inform the teacher or director if my chrealize that there will be no school during t	· · · · · · · · · · · · · · · · · · ·
I hereby release and agree to indemnify Trinity Episcopal Day School, Episcopal Day Trinity Episcopal Church of Clemson, Sout agents harmless from and against an judgments, expenses, costs, damages, whatsoever arising out of or in connection my child.	ay School Board of Directors, and Holy h Carolina, employees, members and y and all claims, liabilities, actions, and injuries of any kind and nature
Parent's/Guardian's Printed Name:	
Parent's/Guardian's Signature:	Date: