

Classical Cottage Consortium, Inc.

FIELD TRIP Permission Form

My child, _____, has permission to participate in the Classical Cottage Consortium (C3) Field Trip

to _____
DESCRIBE LOCATION

on _____ .
DATE

As a representative of C3, my child will follow all rules of conduct as specified in the Classical Cottage Consortium Family Contract.

I understand that transportation will be provided by parents of C3, and that I am willingly choosing to allow my child to ride in private vehicles. I hereby state that I will not hold Classical Cottage Consortium responsible for any accidents, injuries, or incidentals that occur to, from, or during the field trip.

In case of an emergency, I give permission for my child to receive emergency medical treatment. In case of such an emergency, please contact:

_____ at _____ .
(name) (phone number)

Parent/Guardian signature _____

Date: _____