

## YOU MATTER MIDDLE SCHOOL CONFERENCE – Parent Permission Form

*Please complete this form and return it to your student's teacher*

To the Parent:

On \_\_\_\_\_, our class will be going on a daylong field trip to the Lassen County Fairgrounds. We will leave school at (time) \_\_\_\_\_ and expect to return to school at (time) \_\_\_\_\_.

Please complete the lower portion of this letter and return it to me by \_\_\_\_\_.

Sincerely,

\_\_\_\_\_

Teacher

We have always placed the health and safety of our students above all other things. However, do we have your permission to obtain medical care for your son/daughter in the event of an emergency? Yes \_\_\_\_\_ No \_\_\_\_\_

Does he or she have medical insurance? Yes \_\_\_\_\_ No \_\_\_\_\_

Insurance Company Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Please note any allergies (special medications or diet) or physical conditions, which might limit student's participation in outdoor activities: \_\_\_\_\_

\_\_\_\_\_

Name of student: \_\_\_\_\_

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Emergency phone: \_\_\_\_\_

I hereby give my consent for the above-named student to participate in the "You Matter Middle School Conference."

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_