

# Waldorf High School of Massachusetts Bay

160 Lexington Street, Belmont, MA 02478 (617) 489-6600

## DAY TRIP PERMISSION FORM 2019-2020

I give permission to my daughter/son/ward,

\_\_\_\_\_.

to go on class day trips for the 2019-2020 academic year.

Day trips are defined as class trips that take place for all or part of the regularly scheduled school day. Students will be dismissed from school (unless other transportation arrangements are agreed upon) at the regular dismissal time.

Day trips include, but are not limited to, area libraries, museum, art galleries, theaters, businesses, and nature/park conservation lands. Transportation may be either private car or public transportation. The costs of these trips will vary.

Students will be under the supervision of Waldorf High School faculty and/or visiting faculty.

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

I hereby grant Waldorf High School of Massachusetts Bay (WHSMB) and its agents full authority to take whatever action they deem necessary regarding the health of my son/daughter/ward in the case of an emergency where I am not able to make the decision. I fully release WHSMB and its agents from any liability in connection with those decisions. I grant permission for emergency treatment by WHSMB, a rescue squad, private physician and/or hospital or emergency health care facility staff under the same circumstances as above. I hereby understand that any such action will be taken in my son's/daughter's/ward's best interests. I hereby release WHSMB and its agents from any legal liability resulting from accidental injury.

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