

**STUDENT CONSENT FORM FOR Extended SCHOOL FIELD TRIPS
(For Students 18 years of age and older)**

This form must be read and signed by a student who wishes to participate. Failure to return this form will result in the student not being able to attend the activity.

Name of Student: _____ Grade: _____

School: _____

Student's address: _____

Student's Cell #: _____

Parent/Guardian (or Next of Kin) Home Telephone #: _____

Parent/Guardian (or Next of Kin) Business Telephone/Cell #: _____

Parent/Guardian (or Next of Kin) e-mail: _____

Proposed Trip (activity and destination): _____

Pertinent Details: _____

Elements of Risk:

- 1.
- 2.
- 3.

Date(s) of Trip: _____

Time of Departure: _____ Time of Return: _____

Place of Departure: _____

Place of Return and Other Information re: Pick-up: _____

Trip Contact Person (available 24 hours) Phone #: _____

Staff Supervisor(s): _____

Cost of Participation: _____

