Appendix VI

Field	Trip	Permission	Form
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Instructions: Please complete this form an	nd read this entire document carefully before s	igning.
Student's Name:	School Name: ROSS ES	
Trip Destination: Walk Around Nei	ighborhood	
Departure Date: SY 22-23	Return Date:	
Please return this form to ROSS ES	before you or your child participates	in the field trip.
If you do not understand this form, please	contact Holly Searl (Principa	ıl/Trip Sponsor).

## I acknowledge and agree as follows:

- 1a. As a student 18 years of age or older, I acknowledge that I must sign this form before I can participate in the District of Columbia Public Schools (DCPS) field trip listed above.
- 1b. As the parent or legal guardian of a student under 18 who is named above and participating in the DCPS field trip listed above, I acknowledge that I must sign this form before my child can participate in this field trip, and I give permission for my child to participate in this field trip.
- 1c. As the parent or legal guardian of a student who is participating in the DCPS field trip listed above, I acknowledge that I must sign this form before I can participate in this field trip as a chaperone.
- 2. I acknowledge that I have reviewed and understood all documents provided by DCPS describing the particulars of this field trip, including the location of all activities, the duration, method of transportation, educational merits, inherent risks associated with the activities involved and the voluntary nature of the field trip.
- 3. All participants in the field trip listed above, including chaperones, will perform only those tasks assigned to him or her, will observe all safety rules, and will use care in the performance of all activities.
- 4. I acknowledge that there are risks associated with the field trip listed above, and I agree to assume any and all risks as may be reasonably foreseeable to result from such field trip on behalf of myself and/or my child, subject to the limitations set forth in this form. I understand that not all inherent risks connected with the field trip can be described in the documentation provided by DCPS regarding this field trip.
- 5. I understand that I and/or my child may choose to opt out of participation in any particular component of the field trip listed above, and that attendance on the field trip is in no way conditioned on full participation in every scheduled event.
- 6. I agree to inform the school nurse and/or principal at the school named above, as appropriate, of any health issues or changes in health status that may affect or limit my and/or my child's participation in the field trip listed above, including, but not limited to, medications being taking. dates of hospitalization in the last year and the reasons for any such hospitalization, any illnesses and any other special health-related issues.