

MOSCOW HIGH SCHOOL

402 E. 5th Street – Moscow, ID 83843

Phone: (208) 882-2591 Fax: (208) 892-1136

Website: mhs.msd281.org

Erik Perryman, Principal

Brett Clevenger, Assistant Principal

Patrick Laney, Assistant Principal/Activities Director

TRAVEL PERMISSION SLIP

_____ has my permission to attend all school related field trips.
Student Name

Field trips offer students valuable opportunities to supplement the regular program of classroom instruction with first-hand observation. Field trips with extended hours or overnight will require a separate field trip permission form. Transportation will be provided by the Moscow School District #281.

X _____
Parent signature Date Phone number Emergency phone #

PLEASE COMPLETE AND SIGN THE REQUIRED MEDICAL RELEASE FORM BELOW: Medical Release

Persons authorized to care for student in emergency, if parents cannot be reached: (local resident).

Emergency Contact	Relationship to Student	Telephone
Physician:		

Chronic Health Problems
(specify): _____

Allergies _____ Special Instructions: _____

When a student suffers a serious injury or illness while in school, first aid will be rendered in accordance with school policies, and an immediate and continuing effort will be made to contact the parents of that student, or the person(s) the parent has selected as an alternative.

In case of accident or other emergency if parent/guardian or authorized alternative cannot be reached, I hereby authorize a representative of the school to make such arrangements, as he/she considers necessary for my child to receive medical or hospital care, including necessary transportation. Under such circumstances, I further authorize the physician named above to undertake such care and treatment of my child, as he/she considers necessary. In the event said doctor is not available, I authorize such care and treatment to be performed by any licensed physician or surgeon.

The undersigned agrees to bear all costs incurred as a result of the foregoing.

Insurance Carrier Name: _____ Insurance ID # _____
The information provided on this form is current and accurate.

Signed: _____ Date: _____
Parent/Guardian