



## CECFC PARENT FIELD TRIP FORMS

### CEC PERMISSION FORM

Dear Parent or Guardian,

#### Field Trip Information

**Date:** January 16, 2020.

**Location:** Meet at High School Entrance

**Purpose:** Career Fair – Students interested in Architecture, Design, Business, Engineering, and Construction

**Cost:** none

**Means of Transportation:** Bus or Student Driving Self (no passengers)

**Time leaving school:** 9:30am **Time arriving back at school:** 12:15pm

**Special Instructions:** Students should plan on eating lunch during 5<sup>th</sup> period when they return to school.

Your child's class is going on a field trip. Please read all the information, sign and date where indicated, and return the permission slip at the bottom of this form by **1/14/2020**.

I, (print name) \_\_\_\_\_ am the custodial parent and/or legal guardian of:

(print name of student) \_\_\_\_\_. I give my permission for the student to participate in above mentioned activity:

I acknowledge that the student's participation in the activity is a privilege and is completely voluntary. If I elect to not allow my child to participate for any reason, my child will be responsible for completing an alternative assignment provided by the instructor.

I understand that Colorado Early Colleges (CEC) is not responsible for insuring me or the student with regard to the student's participation in the activity or any fund-raising event associated with the activity. I am responsible for obtaining any medical, accident, or other insurance that I may deem appropriate.

I understand that CEC and its employees may have certain legal protections and immunities from liability with respect to any property damage or personal injury that may occur during the activity or any fund-raising event associated with the activity. CEC and its employees have not waived these protections and immunities.

By signing this form on behalf of myself, the student, and our family and representatives, I release, indemnify, and hold harmless CEC and its employees from and against all claims for damages or injuries involving the student which occur as a result of the student's own misconduct, the actions or omissions of third parties, or relate to property which is not owned by CEC. I understand that for purposes of this Form, the term "employees" includes CEC's directors, employees, servants, and volunteers.

**Student's home address:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Phone number:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_

**Custodial Parent/Legal Guardian Signature / Date** \_\_\_\_\_

**Effective:** 8/1/2018