

**CONSENT FOR FOR SCHOOL SPONSORED FIELD TRIP**

I hereby give permission for my child, or ward, **(name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** to attend the **Ice Skating Field Trip**. In granting this permission, I assume full responsibility for any damage to person or property caused by my child or ward. I further expressly agree that in the event of disciplinary action, or if the health of my child or ward makes it necessary at the discretion of the sponsors, my child or ward may be forthwith returned home at my expense. I understand that the student accident insurance carried by **Dallas Christian Academy** is in force for this activity, and I assume financial responsibility for any medical or dental expense incurred over and above that covered by the student accident insurance.

We, the undersigned, do hereby consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital service that may be rendered to said minor under general or special instruction of the school personnel whether the said diagnosis or treatment is rendered at the office of said physician/dentist or at a licensed hospital.

It is understood that this consent is given in advance of any specific diagnosis or treatment being required but is given to encourage the school personnel and said physician/dentist to exercise their best judgment as to the required of such diagnosis or treatment.

It is also understood that every possible attempt will be made to contact the parents first; only in the case of extreme emergency and failure to be able to contact the parents will this apply. It is further warranted that if this consent form is signed by one of two parents or guardians, it is with the authority of the other.

**FIELD TRIP COST: Money for lunch (or bring a sack lunch)**

**TRAVELING BY: Cano, Calixto, Tucker Vehicles**

**BEGINNING: 8:00 am DCA Departure ENDING: 2:00 pm return**

**LOCATION:**  **Burton Adventist Academy** **4611 Kelly Elliott Road , Arlington, (817) 572-0081**

**DCA School Phone: (214)-528-6327**

**DCA Field Trip Sponsor: Allison Tucker Phone: 214-717-7245**

**DCA Field Trip Sponsor(s): Danny Cano, Kristina Calixto Phone: 832-563-5545; 469-556-0319**

**Signature of Parent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other Information:** Allergies, special medical concerns, etc.

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