



FIELD TRIP PERMISSION SLIP

Event: Solar Eclipse

Destination: Lake Central High School Campus

Date: August 21, 2017

In consideration of the benefits to be derived and in view of the fact that this is an educational institution, in which participation in this activity is voluntary, and having full confidence that every precaution will be taken to insure the safety and well-being of my child in this activity, I hereby agree to his/her participation and waive all claims against the leaders of this activity and the Lake Central School Corporation.

Student's Name: (please print)

ID#

Phone #

Parent's Signature

Emergency Phone #

Date