

2019 Farm Trip Field Trip Permission Form

Rudolf Steiner School of Ann Arbor

My student _____ has my permission to participate in the
Print student's name here

Farm Trip activities. Students will be residing at the **Community Farm of Ann Arbor**

The Community Farm Address is: 1236 S. Fletcher Rd, Chelsea, MI 48118

Parent(s)/Guardian(s) will **drop off** student(s) at the Community Farm on Sunday, June 2 at 4 pm

Parent(s)/Guardian(s) will **pick up** student(s) at the Community Farm on Saturday, June 8 at 2 pm

If the opportunity arises, I give permission for my student to participate in the following:

All activities INCLUDING swimming in the pond All activities EXCEPT swimming in the pond

Please understand that when we go on field trips, the School and the chaperones have little or no control over the ambient environment, and there are always additional risks associated with travel beyond the School grounds. Because of these additional risks, we are asking you, by signing this form, to:

1. Give permission for your child to participate in the Farm Trip;
2. Contact the trip coordinators or the HS Coordinator if you want more information about the Farm Trip, or if you have information you think the trip chaperones should know;
3. Hold the School and chaperones harmless for matters beyond their control;
4. Update your emergency contact information and your child's medical condition form, if they need to be updated;
5. Authorize the chaperones to seek and initiate medical treatment, if they deem it necessary; and
6. Talk with your child about behaving appropriately and following the directions of the chaperones on the Farm Trip.

If you have any questions, please contact Gary Banks, Erica Choberka, or Laura Shope.

Parent Signature

Date

Parent Name (print) _____ Student Name (print) _____