Paulding County SCHOOL DISTRICT REALITY FAIR: Permission Form

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| Name: |  |
| School: |  |

# Please return this permission slip by October 16th .

I give permission for my child to participate in Paulding County School District Reality Fair, which will take place at each of the high schools in the district. Middle schools will follow feeding patterns for attendance at a particular high school.

**Moses Middle School Students will attend the Reality Fair at North Paulding High School on October 24, 2019 from 9:30 am- 12:00 pm.**

If any emergency medical procedures or treatment are required by the student during the trip, I consent to the trip supervisor(s) taking, arranging for, and consenting to the procedures or treatment in his/her or their discretion. I agree to release, indemnify, and hold harmless the Paulding County School District District), its Board of Education, and its employees, agents, or assignees, as well as its approved adult trip supervisors from and forever promise not to sue them on any and all claims, demands, rights, causes of action, liabilities, losses, damages, costs and expenses (including reasonable attorneys’ fees), whether known or unknown, that I, any other parent or guardian of the above-named student, or the student may have or may allege to have against the District or which may be brought against the District arising out of or in any manner relating to the student’s participation in the field trips, including but not limited to the rendering of emergency medical procedures or treatment.

# Special instructions for my child:

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# Emergency contact:

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| Name: |  |
| Phone: |  |

In case of an emergency, I give permission for my child to receive medical treatment.

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| Parent/Guardian signature |  | Date |