



**PARENT/GUARDIAN PERMISSION AND RELEASE OF LIABILITY
FOR OFF-CAMPUS ACTIVITY**

I, _____ the parent/guardian of _____, a student at

_____ give my permission for my son/daughter to participate in the off-campus activity described as follows:

Date: _____ Event: _____

Date: _____ Event: _____

Date: _____ Event: _____

Date: _____ Event: _____

Date: _____ Event: _____

I hereby acknowledge that there may be risks associated with participation in the off-campus activity(ies) listed above, and despite inherent risks, I consent to my student’s attendance and participation. I understand that I may choose to opt my student out of all or some of the off-campus activity(ies), and in the alternative, my student will be expected to attend school and engage in other meaningful educational activities under the supervision of an educator. In addition to granting consent, by signing this document, I hereby release and agree to hold harmless Granite School District and its officers, agents, and employees from all liability or claims stemming from any accident, injury, loss, or other damages that could potentially arise out of my student’s participation in the activity(ies). Finally, I provide consent for my student to receive emergency medical treatment in the event of an accident.

I have read, understand, and accept the terms and conditions recited above.

Student’s Signature (as appropriate) Date: _____

Parent’s/Guardian’s Signature Date: _____

Parent’s/Guardian’s Daytime Phone Number

School Notes:

