

# LIGHTHOUSE CHRISTIAN SCHOOL

## Field Trip Permission

Field Trip Date: \_\_\_\_\_ Class(es) Participating: \_\_\_\_\_

Destination: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Cost (including \$1 bus fee): \_\_\_\_\_ Money Due By: \_\_\_\_\_  Check(made out to LCS)  Cash

Sack Lunch Required:  Yes  No Eating at restaurant  Yes  No Additional \$ for lunch \_\_\_\_\_

Estimated time of: Departure \_\_\_\_\_ Arrival \_\_\_\_\_ Return \_\_\_\_\_

Type of transportation: \_\_\_\_\_ Driver(s): \_\_\_\_\_

Chaperones: 1. \_\_\_\_\_ 2. \_\_\_\_\_

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/we hereby release and agree to indemnify and hold harmless Lighthouse Christian School and/or Lighthouse Ministries ("the school"), its employees and agents, from and against any and all claims and causes of action for personal injuries to my/our child or property damages I/we incur arising out of or resulting from his/her attendance at the school and/or participation in any school-related activity, and all costs and expenses, including reasonable attorney fees incurred by the school for defense of any such claim or cause of action; except that this release and indemnification agreement shall not apply to any such claim or cause of action resulting from acts by the school, its employees or agents determined by a court to be gross negligence.

I also hereby grant permission and consent for the rendering of medical treatment to the child in the event of injury. The parent or legal guardian must sign this release before the child will be allowed to participate in the Lighthouse Christian School field trip.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Homeroom