



Statement of Authorization

I am the parent or legal guardian of _____ and in consideration of the privilege of participation in field trips and related activities, I do give my consent and permission to said child to participate in any and all supervised field trips and related activities, and waive any claims against Woody Creek Kids that may arise out of and any way connected to any field trips or related activities

If I cannot be reached in case of emergency or injury to my child, I grant permission to have full treatment given by the physician on call.

Parent and Guardian

Date

Signature