

## STUDENT FIELD EXPERIENCE AND SPECIAL ACTIVITIES PARENTAL CONSENT FORM (Routine)

Please Return This Completed Form by: 1 UESCIAY	, June 10, 20	)25		
Name of School: McCammon Elementary		tivity Date: Thursday, June 12, 2025		
The Board of Education requires completion of this consent outside of the school and activities of a special nature held of basketball games require a one time approval only. Stude supervised study.	t form for students on school district pr	participating in an operty. Regularly s	y school field experience scheduled events such as	
Purpose: Book Read-A-Thon; Community				
	Return Time: 11:20 am at McCammon			
Destination(s): The Bookman		·		
	Cost to student: No Cost			
Students will need to bring: Dress for the weath	ner, comforta	ble walking s	hoes.	
Sponsor Teacher(s): Ms Heinrichs				
Supervision Provided by: Ms Heinrichs				
Accidents can be the result of the nature of the activity and ca or the school board or its employees or agents, or the facility to participate in this activity, you are accepting risk of an accid suitable for your child.	where the activity is	taking place. By a	llowing your son/daughter	
Principal signature	Sponsor Teacher(s) signature(s)			
to The Bookman on 06/12/25 to certain risks while participating in this activity and that accid Student's Care Card Number:	_( <i>mm/dd/yy</i> ). I und lents and injuries m	nission to participate lerstand that my chil ay occur.	•	
Medical Information (please include any medical or health con	icerns):			
Signature of Parent/Guardian	Date			
Signature of Parent/Guardian			1	
Signature of Parent/Guardian  Printed name of Parent/Guardian		/ Work Phone #	_ / Cell Phone #	