



Geneva Classical Academy

A Uniquely Classical, Distinctively Christian Education for K-12

Field Trip Permission Form

Student Name: _____

Field Trip Destination: _____

Field Trip Date: _____

I hereby authorize the student's participation in this event. I understand that participation in the activities that make up this event, and traveling to and from this event, is not without some inherent risk of injury. In consideration of student's involvement in this event, I hereby release, waive and discharge the sponsor of this event, Geneva Classical Academy, Inc., the faculty, staff and Board of Directors of Geneva Classical Academy, Inc., the chaperones and drivers for the event, or any employees or agents of these entities (releases/indemnities), of and from any and all liability, claims, or causes of action whatsoever arising out of or related to any loss or injury, including death that may be sustained by the student, including claims arising from the negligence of releasees, and I covenant not to sue any releasees. I further agree to defend, hold harmless and indemnify indemnities from any and all claims and causes of action arising from the negligence of indemnities. The foregoing agreements are effective while traveling to and from the event and while participating in the event and on premises where the activity is being conducted.

I hereby give my permission for the student to be treated for any condition requiring emergency medical care, as determined by a health care professional, and accept responsibility for the cost of treatment. I agree to defend, hold harmless and indemnify indemnities for any expenses incurred in treating the student. In case of sudden illness or accident to student, either at the event or traveling to or returning from the event. I authorize the Geneva Classical Academy, Inc., personnel serving as chaperones to take reasonable action to protect the health and physical well being of the student.

Signature of Parent/Guardian

Date