

**Santa Rosa County School District**  
**Authorization for Student Participation in a Field Trip**  
**Navarre Beach Marine Science Station 2011-2012**  
School Name \_\_\_\_\_

Trip Name: \_\_\_\_\_ Destination: Navarre Beach Park

Date of Trip: \_\_\_\_\_ Mode of Transportation: \_\_\_\_\_

Estimated Time of Departure: \_\_\_\_\_ Estimated Time of Return: \_\_\_\_\_

*\*\*\*Parents, please complete all of the following information.\*\*\**

Student's Name: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**A. Parent/Guardian Permission**

I understand that my son/daughter is not required to attend this field trip. I give permission for participation in the activity. I agree to release the Navarre Beach Marine Science Station under the Santa Rosa County School Board and its officials, officers, and employees from liability for any and all claims of injury which might occur while my son/daughter is participating in this field trip activity.

**B. Emergency Medical Authorization**

Should a medical emergency arise while my son/daughter is participating in this activity, I will be notified at the above number in order to approve medical treatment. In the event that I or one of the emergency contacts listed below cannot be reached, I give permission for immediate treatment as required in the judgment of the attending physician. I understand and agree that I will be responsible for the cost of such treatment.

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Group/Policy Number: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date Signed**