# PCA Upper School Field Trip Permission Form

## **Class Retreat 2019**

I/we give permission for \_\_\_\_\_\_\_to participate in a field trip to Camp Brookwoods, in Alton Bay, NH, on Wednesday, September 11, 2019. The Upper School staff and student body attend this retreat for spiritual renewal and class bonding activities. Students should arrive to school by 8:10 a.m. Buses depart from PCA at 8:30 a.m. and return to the school at approximately 3:00 p.m.

Although the school desires to provide a safe and enjoyable time for all students, accidents can still happen. I/we understand that there are risks/dangers involved with participation in off-campus trips and their associated activities. In consideration of my child being allowed to participate in this event, I/we agree to hold harmless Portsmouth Christian Academy, its affiliated organizations, employees, agents, and representatives, including volunteer and other drivers, from any and all claims arising from my child's participation. This release agreement does not apply to claims of intentional criminal misconduct or gross negligence by the school, its employees, or volunteers. If such circumstances are proved in a court of law, I/we acknowledge and agree that the school can assume no financial liability beyond its actual liability insurance policy in force.

In case of accident, illness, or other emergency, I/we request that the school contact me/us. If the school cannot reach a parent/guardian after conscientious effort, I/we give permission for school staff to call paramedics or any licensed physician or dentist. If a life-threatening emergency exists, I/we give permission for school staff to call paramedics immediately and then contact me/us as soon as possible thereafter.

I/we authorize and consent to any X-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment, and hospital care which, in the best judgment of a licensed physician or dentist, is deemed advisable. I/we agree to assume the financial responsibility for expenses incurred as a result of those services being provided. I/we also agree to be financially responsible for emergency medical transportation.

Emergency Contact:	Phone:
Emergency Contact:	Phone:

### ATTENTION PARENTS

### Students should bring their own lunches.

Dress may be jeans, shorts (dress code length), and appropriate t-shirts (no tank tops), keeping in mind the color assigned to each class. Sneakers are recommended.

### <u>Class colors:</u> freshmen wear green; sophomores wear red; juniors wear orange; seniors wear blue

Use of electronic equipment (IPods, cell phones, etc.) on bus will not be permitted.

### Please sign this form and return to the Upper School office by Friday, September 6th, 2019.

If you have any questions, please contact Ms. Karnes at 742-3617 at ext. 154.

Parent or Guardian Signature and Date