

Career Pathways

Beaverton School District's Comprehensive School-to-Careers System

Beaverton School District 48
16550 SW Merlo Road
Beaverton, OR 97006-5152

Parent/Guardian Permission
Change of campus-school sponsored activity

School:	Date of Activity:	Student's Name:	
Description of Activity:	Departure/Return Time:	Location of Event:	Telephone (if available)
When more than one trip is anticipated, please explain and attach schedule:			
Supervising Teacher:		Principal:	

MEDICAL WAIVER

I, the parent/guardian of the above named student, grant permission to the supervising teacher to authorize necessary medical services in an emergency, including injection, anesthesia, surgery, and medication. I understand that an attempt will be made to contact me at the telephone numbers shown below, and I agree to be responsible for any expenses not covered by home or auto insurance that may be incurred as a result of an accident or medical emergency involving the above named student.

TRIP PERMISSION

I grant permission for my child to use his/her own automobile to accomplish the unsupervised trip(s). My child's automobile will be covered by our own personal automobile liability insurance to cover any accidents, injuries, or other claims that may arise or result from operation of the automobile during the trip(s). We agree to indemnify, defend, and hold the Beaverton School District harmless with respect to any claims, damages, or injuries which may result from the use of the automobile, or from any other cause, during the trip(s).

Parent/Guardian Signature:	Date:	Home Phone:	Work Phone:
Policy Number:	Name of Automobile insurance Provider:		

Ride/Car Pool

I authorize my student to ride/carpool with an adult driver or other student driver. I agree to indemnify, defend, and hold the Beaverton School District harmless with respect to any claims, damages, or injuries which may result from my student riding or car pooling, or from any other cause during the trip(s).

Parent/Guardian

Date

Public Transportation

I authorize my student to travel on public transportation. I agree to indemnify and hold the Beaverton School District harmless with respect to any claims, damages, or injuries which may result from these trips.

I have read the above document and understand this agreement and all its terms.

Parent/Guardian

Date

ALWAYS CHECK THIS TYPE OF DOCUMENT WITH YOUR DISTRICT RISK MANAGER.

July 12, 2002