



Hickory Ridge Academy Early Learning Center Parent and Guardian's Trip Permit

_____ is now under my control and in my custody. I hereby give my consent for the above named student to participate in a Hickory Ridge Academy Early Learning Center trip and to go with **his/her teacher**, or any other approved chaperone, to all designated places or tours involved in the planned trip. The parent herewith grants permission for any authorized representative of Hickory Ridge Academy Early Learning Center to secure medical services for the above named student if necessary.

It is understood that neither Hickory Ridge Academy Early Learning Center nor its Trustees, Superintendent, Principal, Teachers, Bus Drivers, HRCC or employees, together with all persons, including parents assisting with any phase of such trip and activities, assumes any responsibility, **other than that already imposed by law**, in case an accident occurs. In consideration of the above named student being permitted to make such a trip and take part in such activities, I hereby release Hickory Ridge Academy Early Learning Center and all those assisting with any phase of such trips and activities, **except that I do not re-lease any party from liability for negligence, recklessness, or intentional misconduct**. I agree to indemnify and hold all of said parties harmless from all claims hereafter made by, asserted on behalf of the above named **student, with the exception of claims for negligence, recklessness, or intentional misconduct, as specified above.**

In case of accident or serious illness, I request the school to contact me. If the school is unable to reach me, I hereby authorize the school to call the physician on record and to follow his/her instructions. If the school/daycare is unable to contact this physician, the school may make whatever arrangements seem necessary.

Print Name of Parent or Guardian

Signature of Parent or Guardian

Date

*****FORM MUST BE NOTARIZED FOR ALL STUDENTS*****

Given under my hand this _____ day of _____, _____

Notary Public

My commission expires _____.