

PO Box 283 Hillsboro, OH 45133

Info@teamdrivingschool.com

teamdrivingschools.com (937)366-9240

Laurel Oaks Student Field Trip Permission Slip

Student:

Program:

Instructor: Laurel Oaks Career Campus

Instructor Phone: (937) 382-1411

Date: From To

Time: From To

Location of Trip TEAM Driving School In-car Driving Requirement

Specific Instructions about Field Trip: This permission slip is to grant parent/custodial permission to allow their student to complete in car driver training with TEAM Driving School during the school day.

The undersigned (parent, legal guardian or legal custodian (circle whichever is applicable)) of the named student and such student hereby consent and grant permission for such student to participate in the field trip or field experience in dicated above. The undersigned recognize that the potential risk of injury to the person or property of such student by participation in the trip or field experience may or may not be of different character fully aware of such risks, it is our desire that such student participate in the designated event, we release the Great Oaks Institute of Technology and Career Development Board of Education and its employees, agents and contractors from all liability of whatsoever character, including but not limited to injuries to person or property

| arising out of resulting from or in any way connected with participation by such student therein. | |
|---|-------------------|
| | |
| Signature of Parent/Guardian | Date |
| | |
| Emergency Contact | Cell Phone Number |
| | |
| | |
| Signature Of Student | Date |
| | |