

Lycée Français of Chicago

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LYCÉE FRANÇAIS

FIELD TRIP

Parental Authorization and Waiver

Date:

Le Lycée Français de Chicago is organizing a field trip for the
(GRADE)

students to travel to
(PLACE)

The field trip will be on from to
(DATE) (TIME)

The students will be transported by
(FORM OF TRANSPORTATION)

Lunch required

Our child has signed on, with our permission, to participate in the trip. I am/We are the parent(s) of the child whose name is set forth below and have parental authority to execute this Parental Authorization and Waiver. I hereby give permission for my child to participate in the trip. I hereby waive any claim against the school or its authorities for any injury suffered by my child in connection with the trip, and in connection with the trip transportation.

DATED:

NAME OF STUDENT:

SIGNATURE OF PARENT(S):

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