



## 2010-2011 Fieldtrip Permission Form

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*I agree that my son/daughter is required to adhere to Henry Ford Academy: School for Creative Studies' rules and the directions of the instructor while on any HFA:SCS field study; this also means wearing the HFA:SCS uniform unless otherwise directed by HFA:SCS administration. I hereby authorize in advance any medical treatment my child may need while attending any HFA:SCS field study. Furthermore, I agree to absolve the excursion sponsor and attendants of all personal responsibility, knowing that all reasonable precautions will be taken to ensure the safety of my child.*

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_

***By signing this form you give your child permission for all field studies during the course of the year at Henry Ford Academy: School for Creative Studies. We will forward information about each study as they arise.***

**Medical Condition (please check the appropriate box)**

- My child **has** a medical condition that the study sponsor needs to be aware of.  
*\*Please explain and provide any necessary instructions.*

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- My child **does not** have a medical condition that the study sponsor needs to be aware of.