

**LOWER PLATTE SOUTH NATURAL RESOURCES DISTRICT  
Field Trip Permission Form**

As a parent/guardian, I give permission for my child to participate in the activity noted below. I understand that this is an off school premises activity and that Lower Platte South Natural Resources District (District) staff will be supervising the activity. I understand that transportation will be provided by the means noted below and give permission for my child to travel in this manner. In addition I give permission for the person noted under Emergency Medical Authorization to act on my behalf should emergency medical care become necessary. I understand the potential risk my child may face in the trip and the method of transportation for the trip. I acknowledge that the District is **NOT RESPONSIBLE** for any injury or loss of property to any person suffered while traveling with or participating in activity listed below for any reason whatsoever, including ordinary negligence. My signature also acknowledges that I understand the type of transportation. If not School bus, liability rests with the commercial carrier company.

**TYPE OF TRAVEL** (Mark applicable space):

Commercial Carrier       School Bus

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

Activity: Wagon Train Recreation Area

Date: \_\_\_\_\_

Emergency Medical Authorization to: \_\_\_\_\_ Phone \_\_\_\_\_

Name of NRD District Staff:

McKenzie Barry and/or Adam Sutton and LPS NRD Environmental Education Aides and/or LPS NRD Environmental Education Interns

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_