CORSICANA ISD 175903

STUDENT ACTIVITIES **TRAVEL**



Corsicana Independent School District

FMG (Exhibit)

Parental Permission for Educational Trip

Trip Location/Name	Date(s) of Trip	School Name
☐ I hereby grant permission for my cabove.	nildt	o travel to and from the field trip listed
I understand that Corsicana ISD, its trustees, officers, and employees have immunity under Texas law, are not liable for any accident or injuries that may occur to the above named student as a result of his/her participation in this field trip, except as specifically provided by state law. I understand that my student will be required to comply with all School District standards of conduct and rules for behavior while on the trip, and that failure to do so will result in disciplinary action and/or exclusion from participation in the activity.		
I further hereby authorize a representative of the School District to consent to medical treatment of the above-named student in the event of an emergency on the trip.		
I, the undersigned, have read this permission form and consent to medical treatment and understand all its terms.		
Signature of Parent/Guardia	<u> </u>	Date
Medical Concerns:		
Note: Student Medical/Emergency Information Card must be on file in the school office.		
☐ I DO NOT grant permission for my child to travel to and from the field trip listed above.		
Signature of Parent/Guardia	1	Date
Parent/Guardian Home Phone	Work	Phone
Emergency Contact Name	Relation to St	udent
Emergency Contact Phone		

Corsicana ISD (CISD) does not discriminate on the basis of race, color, religion, national origin, gender, or disability in providing education services, activities, and programs, including vocational programs, in accordance with Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Educational Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.

Questions or concerns about discrimination against students based on sex, including sexual harassment should be directed to the CISD Director of Human Resources, the district Title IX coordinator. Questions or concerns about discrimination on the basis of a disability should be directed to the CISD Transition Coordinator, the district ADA/Section 504 coordinator. All other questions or concerns relating to discrimination based on any other reasons should be directed to the Superintendent at the Lee Education Center 2200 W. 4th Ave Corsicana, TX 75110, phone (903) 874-7441.