

TKC!

**THE HIGHLANDS SCHOOL  
PERMISSION FORM**

STUDENT NAME: \_\_\_\_\_

GRADE: \_\_\_\_\_

FIELD TRIP DESTINATION: \_\_\_\_\_

FIELD TRIP DATE/ TIME: \_\_\_\_\_

As the parent/guardian of the above named student, I give my full permission for said student to attend the above referenced field trip. I fully understand the costs, dates, times, and location of the above referenced field trip. It is my understanding that all students will be transported to and from the field trip by an authorized transportation system.

I hereby release The Highlands School, The Diocese of Dallas, its trustees, employees and servants from any and all liability, damages, or claims resulting from such student being allowed to travel and/or participate said field trip, and I agree to hold them harmless from any damages or claims which might arise from injuries out of any act or omission on the part of The Highlands School, other than negligence in the operation of a motor vehicle, or the use of excessive force in the administration of discipline, pursuant to Article 6252-19 of Texas Tort Claims Act, and Section 21.912 of the Texas Education Code, as a result of such trip or activity.

I also grant The Highlands School and/or any of its trustees, employees, and servants my permission to seek medical assistance for the above referenced student should such medical assistance be needed during the field trip.

\_\_\_\_\_  
Date

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

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Emergency Contact Information

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_