



## **AVID Field Trip Permission Form**

I hereby consent to \_\_\_\_\_ (student name), participating in the field trip on Monday, November 27, 2017 to Oregon State University, in Corvallis, OR with the AVID class of Ogden Middle School. I do hereby release, indemnify, and hold harmless Travis Nordurft, and all employees or representatives thereof, including, but not limited to, any person volunteering their time to assist with this activity from any claim, demands, or causes of action arising out of injury to the above-named student. Further, in the event such a student is injured and needs medical treatment, I authorize Travis Nordurft or any person designated by them to obtain necessary medical treatment for such student.

In case of emergency, please contact \_\_\_\_\_ (emergency contact name) at the following phone number \_\_\_\_\_ (emergency contact phone).

Guardian Signature:

\_\_\_\_\_

Printed Name:

\_\_\_\_\_

Relation to Student:

\_\_\_\_\_

Home Phone:

\_\_\_\_\_

Work Phone:

\_\_\_\_\_

Cell Phone:

\_\_\_\_\_

Email:

\_\_\_\_\_