

# THE SCHOOL BOARD OF HERNANDO COUNTY, FLORIDA

## Education Activities Permission for Participation

I/We, hereby grant permission for (name of student) \_\_\_\_\_  
to participate in all education activities and trips for the current school year. I/We understand that  
announcement of the activities or trip and location will be made in advance, so that if I/we were to have  
any objections, I/we could easily phone or write the school and my child would not participate in the  
activity or the trip.

I/We authorize the school representative, in the exercise of his/her best judgment as to necessity, to obtain  
medical treatment in the event of illness or injury and the undersigned agreed to pay any expense incurred  
for this treatment.

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

Student Number: \_\_\_\_\_

Street Address: \_\_\_\_\_  
\_\_\_\_\_

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