Wheeling Country Day School Field Trip Permission Slip



are voluntary and w	om time to time my child, cipate in trips that will tak rill be under the direct sup ill be transported in a bus	pervision of a fact	rom the campus. I understand that the ulty member(s) of Wheeling Country D	have the nese trips Oay School	
I request that my so	n/daughter be allowed to	o attend such field	d trips.		
I also authorize any of such treatment.	medical treatment in cas	se of an emergen	ncy, and agree that I am responsible f	or the cost	
agents, representati son/daughter which	ives and employees from	all claims, damas ss negligence, inte	and indemnify Wheeling Country Day 3 ges, or other liabilities for injuries to my entional neglect, or willful or wanton o	/	
			,		
Signed this	day of Day School or until I/w	, 20_	, for as long as my child remains a	at	
Traceing country	way someon or amount in		100000000000000000000000000000000000000		
Parent/Guardian Signature			Relationship		