

**BOULDER VALLEY SCHOOL DISTRICT  
STUDENT TRAVEL  
FIELD TRIP PERMISSION FORM**

I hereby permit \_\_\_\_\_ to participate in  
\_\_\_\_\_ (student)  
\_\_\_\_\_ on \_\_\_\_\_  
(describe trip/activity) (date(s))

He/she will be transported by:

School bus	_____	Fee required	_____
Private Car	_____	Other needs	_____
Walking	_____		_____
Transportation is the responsibility of parent	_____		
Other	_____		

(specify)

1. I understand that the Field Trip/Activity may take place away from school property; may involve transportation by school bus, private vehicle, common carrier or other mode of transportation; and may involve activities beyond the scope of traditional school functions conducted on School District property.
2. I acknowledge that my student's participation in these activities potentially involves risks and obligations that are impossible to predict, but may include the risk of loss or damage to personal property and the risk of sickness, personal injury or death.
3. I understand that the school district does not purchase, or have, any medical, dental or hospitalization insurance to cover injuries to or loss of life of pupils or to indemnify parents and guardians for expenses in connection therewith, and that such insurance, if desired, must be purchased by me.

If you have special needs due to a disability, and wish to request accommodations in order to participate in this activity, please notify our school office at (303) 453-4601 at least two (2) days in advance of this event so that appropriate arrangements for reasonable accommodations may be made. You may also call the central office at (303) 447-1010 x6082 or (303) 447-5488.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
*Parent or Guardian*

**PLEASE RETURN THIS SLIP PROMPTLY**

TO BE USED FOR LOCAL AND METRO AREA SHORT TRIPS, FORM IS TO BE  
COMPLETED BY STAFF AND SUBMITTED TO PARENT FOR SIGNATURE.