Minidoka County Joint School District #331

INSTRUCTION 2550F

20001
sored activity requiring transportation to a
ment of consent and release of liability. As for any legal responsibility which may result ent. I hereby consent to participation by my the event described above.
nbers:
Phone Number:

Phone Number: _____

Phone Number: _____

Name: _____

Name:

If you cannot be reached in an emergency and, if in the judgment of the school authorities,
immediate medical and/or hospital attention is indicated, do you authorize responsible school
authorities to take your child to an available hospital or physician?

Yes

No

All students will follow the code of conduct expected when participating in any school sponsored activity. If a student violates that conduct, they will be subject to disciplinary action including, but not limited to, being sent home at the parent/guardian's expense.

Students not meeting grade requirements may not be able to participate in activity trips.