

**GREATER CLARK PERMISSION / FIELD TRIP FORM**  
**FOR ATHLETICS, MARCHING BAND, DRILL TEAMS, CHEERLEADING, AND/OR SCHOOL-  
SPONSORED EXTRA-CURRICULAR ATHLETIC PARTICIPATION**

**ACTIVITY: Jeffersonville High School Band**

I certify that by signing this permission / field trip form, I have the legal authority to and do allow the child (ren) named below to participate in athletics, band, drill teams, cheerleading, and/or GCCS sponsored extra-curricular sports/athletic activities at the school that they are attending in the Greater Clark County School Corporation.

I understand that there are risks involved with children participating in physical activities and that injuries can occur. I further understand that serious health problems can be caused by any number of undiagnosed conditions, including but not limited to, previously unsuspected cardiovascular disease and that it is my responsibility as parent/guardian of the child (ren) named below to have appropriate medical examinations performed on the child (ren) before granting this permission to participate.

I further understand that Greater Clark does not provide any medical insurance coverage for my child(ren)'s participation in these activities. In the event of an accident/injury, I agree to be responsible for any and all costs of medical treatment.

I also understand that by signing this form I hereby give permission for the child (ren) listed to accompany the Jeffersonville High School Band and its supporting ensembles on field trips to any/all contests, concerts, or performances by the Jeffersonville High School Band on both local and out-of-town trips.

The provided transportation will be either commercial carrier or school bus. In consideration of the advantages of the field trips, the undersigned agrees that the GCCS Board, its agents, and employees, and the driver or owner of the vehicle used for trips shall be exempt from liability for damages for the bodily injury or property that might occur during the trip, except to the extent of insurance liability as provided by law.

If this form is not returned to the **Band Office** by **May 18, 2021** I understand that my child(ren) will be unable to participate in the activity identified in this permission form.

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

Relationship to student(s): \_\_\_\_\_

Child(ren)'s names: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*Note:** If parent signing this form has students attending more than one school in Greater Clark, the form will need to be completed at each school.