



FREEDOM

CHRISTIAN ACADEMY

ACTIVITY PERMISSION FORM

Dear Parent/Guardian:

My student, _____ has permission to visit _____
on _____, with the _____ of Freedom Christian Academy (FCA).
The field trip will be leaving at _____ am/pm and returning by _____ am/pm. The
cost of the activity is _____ (entry fee) per student and _____ per chaperone. Please
return this form no later than _____. To participate, it is necessary that this
slip be signed by you as the parent/guardian. This will give FCA permission to take him/her on this trip,
and in consideration of that educational opportunity, releasing fully and covenanting not to sue in any
circumstance and indemnifying the school in connection with liability from any such injury covered by
other insurance, and assuming the risk in connection with the Field Trip. The "Academy" includes the
employees, officers, directors, and agents thereof and their estates and heirs, and "liability" includes all
and any cause of action, suit or action, claim, right, judgment, or execution. The class will be traveling by
means of _____.

Signature of Parent/Guardian (on behalf of both parents/guardian), and date:

Sign: _____ Date: _____

Please provide emergency contact information for one or parents:

Phone: _____

Email: _____