



# Bethany Charter School

11824 Hazelgreen Rd. NE

Silverton, OR 97381

(503) 873-4300

## Parent Permission Form

Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Activity: \_\_\_\_\_

\_\_\_\_\_ ( Student ) has my permission to participate / attend above said activity by :  bus  van  private car  foot to various locations for the purpose of participating in the said activity. I agree to hold Bethany Charter School and its officials, agents and employees harmless against any claim for injury or damage except in those cases where the acts of Bethany Charter School district, its officials, agents, and employees have been determined to be negligent by a court of competent jurisdiction. I, also, hereby give my permission to any duly authorized doctor, emergency medical technician, paramedic, nurse, hospital or other medical facility to treat or relieve any injuries received by said minor while participation in or observing at the activity named above. **The above listed student has the following conditions/ allergies/ special needs:**

\_\_\_\_\_  
\_\_\_\_\_

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_

Yes, I would love to volunteer to chaperone on the \_\_\_\_\_ with the \_\_\_\_\_  
( Place )

No, thank you, I can not volunteer at this time.