

Hopkins County Schools

THIS MUST BE COMPLETED IN ENTIRETY

Permit for child to leave school for the purpose of attending Kiwanis Club Meetings at the First United Methodist Church. Leave school at 11:30 am. Meetings begin at 12:00 noon. Be back to school no later than 1:20 pm.

Release of claim for damages and release for medical treatment

I, _____, parent of _____, do hereby consent that such child may leave school during class to attend a Kiwanis meeting on _____ . In consideration of the teacher giving her time in the arranging of such activities, do hereby personally, and on behalf of such child, absolve and release the teacher, the principal, and the Board of Education from claim for personal injuries which might be sustained by such child while in attendance or driving to or from meeting.

Dress Code:

Dress must be professional at all times. No blue jeans, no athletic shoes. Dress is checked. Inappropriate dress will result in the loss of privileges.

Consent for Emergency Care

I/We the parent(s) of _____ do hereby give permission for our son/daughter to be taken to a hospital or doctor by a representative of the school to secure the necessary medical or dental attention. I/we further authorize any duly qualified physician, dentist, or hospital to render such aid or treatment that may be necessary and further authorize the release of pertinent medical information to the physician, principal, or teacher.

_____ Date

_____ Parent/Guardian Signature

Insurance Verification

Company: _____ Policy #: _____

Group #: _____ Last four digits of Social Security #: _____

I, _____, give my permission for my child _____ to ride with/transport _____ to the Kiwanis Luncheon on above said date.

ASSIGNMENTS

4^t Period Teacher Signature: _____ Grade: _____

Assignment: _____

5th Period Teacher Signature: _____ Grade: _____

Assignment: _____