



Southern Minnesota Education Consortium

21697 State Hwy 56
Austin, MN 55912
Phone (507) 857-1160
Fax (507) 355-1218

For School Year: _____

Field Trips

_____ (child's name) has our/my permission to participate in school sponsored trips – by vehicle – or walks – during the current school year. We/I understand the normal risks involved in these activities and agree not to hold the school responsible for any accidents that may occur under normal supervision.

_____ Date: _____
Parent/Guardian's Signature

**We will inform you of any upcoming field trips beforehand.

Permission Slip for Photographing Your Child

From time to time we take pictures during school activities. We would like your permission to use these pictures on our website, Facebook page, in our newsletter/district newspaper, in our picture journals, or on our bulletin board. We will never reference your child by name or provide any specific information regarding your child.

Please take a moment to let us know your preferences regarding our use of photos of your children:

___ YES, I grant you permission to use photos of my child during the current school year.

-OR-

___ NO, Please do NOT take or use any photos of my child during the current school year.

Child's Name (PLEASE PRINT)

_____ Date: _____
Parent/Guardian's Signature