



CINCINNATI WALDORF SCHOOL
Field Trip Permission Slip

I give permission for my son/daughter, _____,
to participate in a field trip to _____
with the _____, on _____ from _____ - _____.
(class) (date) (time)

Trip Information

(To be completed by teacher or trip coordinator.)

Check all that apply:

- _____ Child cost covered by grade school fees
_____ Cost per adult chaperone \$_____
_____ Cost per child (E.C. only) \$_____

Please return payment to: _____ by _____.

Transportation Waiver

According to Ohio State Law children under 8 years old must ride in an appropriate child safety seat unless the child is 4'9" or taller. Every child must be secured in a seat belt. Children under 13 years old should ride in the backseat.

Please initial as applicable:

_____ I am aware that my child will be traveling in a vehicle that is the personal transportation of another parent or teacher. I understand that the insurance policy of the driver/owner of the vehicle transporting my child will be the primary insurance against which all claims will be filed in the event of an accident.

_____ I am a parent/teacher driving my child and/or other children to a school-sponsored activity in my personal vehicle. I assert that I have a valid driver's license and personal car insurance. I understand that my insurance policy will be the primary insurance against which all claims will be filed in the event of an accident.

_____ My child needs to be in a child safety seat when they travel in a vehicle. I will provide the appropriate seat for the field trip.

I fully understand the above statement(s).

Parent/Guardian Signature

Date