



## Seekonk Christian Academy Permission and Release Form

I give permission for my son/daughter \_\_\_\_\_  
to participate in \_\_\_\_\_ field trip  
to \_\_\_\_\_.

The field trip will take place on \_\_\_\_\_ during the hours of  
\_\_\_\_\_. I understand that the cost for this event is  
\_\_\_\_\_.

Please return permission slip and money by \_\_\_\_\_.

The following number of chaperones will be needed for this event \_\_\_\_\_.  
The cost per chaperone is \_\_\_\_\_.

I am available to chaperone this event Yes / No.

**I give my permission, should the need arise, for my child to receive  
emergency treatment. I understand that every effort will be made to  
contact me before any action is taken. I will not hold Seekonk  
Christian Academy or her agents liable for any accident of injury.**

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

**\*\* Please make checks payable to S.C.A.\*\***