## Fort Worth Independent School District Parent Permission, Release, and Indemnity Trips Form

I hereby certify that my so	n/daughter	0.00	
has my permission to parti-	cipate in the trip of the	(Name of Pupil) HHS Banc	d
on the $\frac{\text{All app}}{\text{(date)}}$ day of $\frac{\text{pp}}{\text{(mo)}}$	roved field	Class or Sponsoring Group)  (Class or Sponsoring Group)  (Location or Description of Act)	orman a
To the best of my knowle suffering from any disease	edge, he or she is physica	ally fit to engage in such activ	vity and is not
employee, or other person	engaged in the activity i	aims against the FWISD and in question and agree to hold aghter for any personal injury our to my son or daughter.	them harmless
It is understood that no c signed by his or her parent	•	participate in this activity unt	il this form is
Signed at, T	exas, this	day of(month)	<u> </u>
(city)	(date)	(month)	(year)
(Signature of Parent or Gua	urdian )		
(Street Address)		(Zip Code)	<u> </u>
(Telephone Number)			

Form 829