

# Zion Christian Educational Center

## ***FIELD TRIPS/ACTIVITIES PERMISSION FORM***

### **OFF-SITE FIELD TRIPS**

I give my permission for my child, \_\_\_\_\_ to attend scheduled field trips with *Zion Christian Educational Center* throughout this school year 2024-2025. All trips will be scheduled between 9:00 am to 3:00 pm. In addition, parents must provide their child's lunch for the day we are off-site.

**I understand that my child/ren will always be supervised by an adult family member, adult staff, adult volunteer, and/or parent chaperones during activities. In addition, I understand that all adults (non-staff members) must have background clearance from PGCPS to participate in all trips and activities.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date

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### **SWIMMING**

My child can swim: \_\_\_\_\_YES \_\_\_\_\_NO

If yes, has the child taken swimming lessons? \_\_\_\_\_ How many years? \_\_\_\_\_

My child has permission to participate in swimming activities: \_\_\_\_\_YES \_\_\_\_\_NO

My child has permission to participate in all other water activities: \_\_\_\_\_YES \_\_\_\_\_NO

(NOTE: swim activities include on-site water play, wading pool, and off-site swim activities)

**I understand that my child/ren will always be supervised by an adult family member, adult staff, adult volunteer, and/or parent chaperones during activities. In addition, I understand that all adults (non-staff members) must have background clearance from PGCPS to participate in all trips and activities.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date