KANELAND COMMUNITY UNIT SCHOOL DISTRICT #302

Trip Permission Form

Date: 1 August 2023			
I give consent for my child:	Name		—
			_
	Address		_
	Phone		
To participate in the activities of	of Kaneland Harter Middle Scho	ool on:	
	Fall Marching Events Dates	2023 (Parade/Performan	ces/Practices)
At:	KHMS to Fall marchi		
	Sugar Grove to Elburn Location of activity	n/Maple Park/Sycamore,	<u>1111no1s</u>
Medical Assistance			
I give permission for trip chape Yes	erones to secure emergency med <u>No</u>	ical treatment for my chi	ld.
Parents who will be away from you may be contacted:	home during the time of this tri	p, please include address	es and telephone numbers where
Will your student require medi	cation to be administered or ava	ilable on this trip?	
Yes	No		
	comply with the provisions and pove-mentioned trip. We consent	-	eland Community School District hich the chaperone in charge thinks
I, the parent of (please print) rules and provisions as they aff insured for this trip.	fect my child. I also understand	, affirm that I have rea that it is my responsibilit	d the preceding and understand the y to have my child properly
I, (student name/please print) _ understand the rules and provis	sions as they affect me.	, affirm that I	have read the preceding and

Parent/Guardian Signature

Student Signature

Please return by Thursday, August 17, 2023