



St. John's Lutheran School

Walking Permission Slip

2018-2019

Equipped · Engaged · Encouraged

Family Name: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

I, the parent/guardian hereby requests and gives permission to take the following trip(s): **walking to the park, gym classes, walk around neighborhood** and with this signed agreement absolves the teacher, St. John's Lutheran School, and any and all members of its governing boards of any responsibility for the safety, welfare, health and well-being of the child named above, beyond such matters as may be called reasonable care for children in the custody of a teacher and subject to the teacher's clear instructions, and assumes personally and exclusively all responsibility and liability for accident, injury, etc., which may occur to the above-named child during the time of the specific activity as set forth at the beginning of the paragraph.

The trip begins at **various times** and the children should be back at school at various times during the school day. Any St. John's teacher will accompany the group.

Parent's/Guardian's signature: _____

Emergency Phone: _____ Date: _____