CLOVIS UNIFIED SCHOOL DISTRICT PARENT PERMISSION FOR STUDENT PARTICIPATION IN AND TRAVEL TO OFF-CAMPUS, SCHOOL SPONSORED TRIPS/EVENTS

Student		has my permission to attend:
Event: All Trav Schedule	vel trips as published or	n the current Clovis Swim Club
Event Date: P	er Clovis Swim Club Sc	hedule
Event Location	n: Per Clovis Swim Club	Schedule
Class/group at	ttending: Clovis Swim C	lub
•	h or Leader: John McG ritten, Rich Petzinger a	ough, Adam Reid, Brian Sharar, An nd / or David Pickford
Health needs (initial as appropriate):	
	My student has no special health/medical needs.	
		health needs medication on
	and will have	
	<u>-</u>	be deposited with
	wn	o is in charge of the trips.
Method of trai airline.	nsportation: By school	district van, rental vehicle, or
		on this trip will be responsible in s, and/or to adult sponsors.
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Signature of Parent or Guardian		Date

Form ST101