

**FIRST BAPTIST CHURCH OF DERIDDER, LOUISIANA
FIELD TRIP PERMISSION SLIP AND MEDICAL RELEASE FORM**

This is to certify that my child, _____, has my full consent to attend the field trips and away-from building activities to be held at First Baptist Church Weekday Preschool during the _____ school term. In no way will I hold the above named church, its members, or its leaders responsible for my child in case of an accident or other misfortune to him/her while attending the activity or traveling to and from the activity. I also understand that I am releasing my child to the authorities of the above said church during this time and they may take any measures they deem necessary for the benefit of my child, including the securing of medical attention.

**SIGNED _____
Parent or guardian**

DATE: _____