



WRIGHT
PREPARATORY ACADEMY

📞 234.207.5455 📍 1500 Superior Avenue, NE, Canton, OH 44705

Dear _____
(Teachers Name)

_____ am the Parent/Guardian
(Father, Mother, Custodial Parent, Guardian)

of _____, a student at
Wright Prep Academy 1500 Superior Ave NE Canton, Ohio 44705.

I hereby grant permission for the above named child to attend:

(Field Trip /Place)

With _____ Grade _____
(Teachers Name) (Grade Level)

On _____ from _____ to _____
(date) (time) (time)

In consideration of my child's being allowed to participate in the field trip, I hereby assume all the risks in connection with the field trip, and I further release Wright Prep Academy and the staff, employees, and volunteers from all claims, judgments, liability for any injury or damage that the child may have due to what is involved in the field trip, and I understand that I have the opportunity to call the teacher and ask him/her about the field trip.

IN CASE OF EMERGENCY, I CAN BE REACHED AT:

(Phone number) (Signature Parent/Guardian)

NO STUDENT WILL BE ABLE TO PARTICIPATE IN THIS ACTIVITY UNLESS THIS SIGNED FORM IS RETURNED PRIOR TO THE EVENT. TELEPHONE APPROVAL WILL NOT BE ACCEPTED

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