

**BOSQUE SCHOOL
GENERAL INFORMATION & CONSENT FORM
2010-2011**

FOR GYM USE, EXPERIENTIAL EDUCATION, FIELD TRIPS, INTERSCHOLASTIC ATHLETICS
(This form must be completed in its entirety for every student—Please print)

Student Name _____

Grade _____

YES NO Parental Consent

We, parent(s)/guardian(s) and student, are aware that preparation for and participation in physical and outdoor education and athletics involve risk of injury to the student that may be serious and even permanent. We understand and acknowledge the eventuality of these injuries as inherent in physical activity. We, parent(s)/guardian(s) and student, have completely read this paragraph, fully understand the risk, and voluntarily accept the consequences of physical activity. I hereby give consent for my child to participate in physical and experiential education and athletics at Bosque School. *(Insurance Note: Bosque School requires proof of insurance for students involved in physical and outdoor education and/or athletics.)*

YES NO General Permission for Field Trips and other Off-Site Activities

Permission is granted for my child to attend scheduled field trips and off-site activities that are a regular part of the school curriculum including, but not limited to, those of the science, physical education, community service, advisory, and social studies/humanities programs. This blanket permission covers all off-site activities where students walk to an activity. It also covers all off-site activities where students are driven by adults approved by both Bosque School's business office and the school's liability insurance carrier. (A separate permission slip must be signed each time a student goes on a field trip where a student is driving a personal vehicle.)

YES NO Promotional Materials

Bosque School has my permission to use my child's photographs and words in its promotional materials.

YES NO E-Mail Information

May we publish your e-mail address in the Bosque School Directory?
Please check if you are unable to receive information via e-mail _____

The school directory is available online through the Parent e Connect. A paper version of the directory will be available in the front office mid-September should you prefer a paper copy.

Language Preference

Primary language spoken at home _____

The National Association of Independent Schools (NAIS) requests diversity statistics annually.
We appreciate your help in reporting these statistics accurately.

- | | | | |
|---|--|--|--------------------------------------|
| <input type="checkbox"/> African American | <input type="checkbox"/> Asian American | <input type="checkbox"/> Native American | <input type="checkbox"/> Multiracial |
| <input type="checkbox"/> Latino/Hispanic | <input type="checkbox"/> Middle Eastern American | <input type="checkbox"/> Caucasian | <input type="checkbox"/> Other |

Signature of Parent/Guardian: _____ **Date** _____