



**THE CANTERBURY EPISCOPAL SCHOOL**  
 1708 North Westmoreland Road • DeSoto, TX 75115  
 972-572-7200 • 972-572-7400 (fax)  
 www.TheCanterburySchool.org

**2011 – 2012 STUDENT PERMISSION – PARENT RELEASE FORM**

**Please Provide Student's Full Name**

**Name (1):** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Name (2):** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Name (3):** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**FIELD TRIP CONSENT / PERMISSION:** \_\_\_\_\_

The above named student(s) has (have) my permission to participate in **all off-campus trips** sponsored by The Canterbury Episcopal School. It is understood that private vehicles driven by a licensed responsible adult provide transportation. My child(ren) will be supervised by an employee of The Canterbury Episcopal School, or by one of the parents of a student in the school, and that reasonable care and precautions are expected at all times. I am aware that participation in an off-campus trip involves certain inherent risks, including but not exclusively, the hazards of highway travel and travel in mountainous and other remote areas without communication or medical facilities, and subject to the unpredictable forces of nature. Knowing of such inherent risks and dangers, and in consideration of the right of a minor to participate, as Legal Guardian of said minor, I represent and agree as follows: my child is healthy and fully capable of participation in said off-campus trips without causing risk of danger, illness, or accident to him/herself or to others. Furthermore, a student or student's family shall not bring or cause to be brought against The Canterbury Episcopal School, its administration, faculty, board of trustees, or representatives any claim or cause of action arising out of injury or death to persons or damage to property that result from or is alleged to have been sustained in connection with, or to have arisen out of or incidental to, the transportation or visitation of students away from The Canterbury Episcopal School.

I have carefully read this agreement and understand its contents, and I sign it of my own free will. References herein to "I" shall include any such family member.

\_\_\_\_\_  
 Signature of Parent or Legal Guardian

\_\_\_\_\_  
 Date Signed

**My child(ren) has(have) my permission to attend any school-sponsored field trip that is offered. Transportation may be by bus or by car.**  Yes  No

**PHOTOGRAPHY RELEASE:** \_\_\_\_\_

The Canterbury Episcopal School frequently uses photographs and / or images of students for school publications and / or promotional purposes. If you do not want your child's photograph used for publication (such as, but not limited to, school publications, Canterbury website, Facebook, etc.) please send a written notice to the school office – to the attention of Kathleen Swafford or email swaffordk@thecanterburyschool.org.

**EUCHARIST PERMISSION:** \_\_\_\_\_

Instructed Eucharist is conducted for all children in The Canterbury Episcopal School. As an integral part of the school's mission and Christian education, these sessions detail the purpose and symbols of the Eucharist, as well as prepare the children for the Communion Services.

The School invites all baptized students to participate in the Communion by taking of the bread and wine. If your child does not receive the bread and wine, he/she will receive a non-Trinitarian blessing from the priest as a part of that service.

**I wish for my child(ren) to receive communion. Exceptions:** \_\_\_\_\_  Yes  No

**If "No", your child(ren) will receive a blessing as part of the Eucharist. All requested exceptions are observed.**

\_\_\_\_\_  
 Parent / Guardian Signature

\_\_\_\_\_  
 Date Signed