



Vista Meadows Academy
20651 West Warren
Dearborn Heights, MI 48127
313-240-4347
www.vistameadowspsa.com

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school premises. This activity will take place under the guidance and supervision of Vista Meadows Academy staff. A brief description of the activity follows:

Name of event: **Charles H. Wright Museum of African American History**

Destination: **315 East Warren Avenue, Detroit, MI 48201**

Date and Time of Departure: **Friday, February 28, 2023 from 9:00am to 12:30pm**

Student Cost: **Lunch will be provided when students return to school.**

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability by **Friday, February 23, 2023**. As a parent or legal guardian, you remain fully responsible for the actions and conduct of your child.

*****Statement of Consent*****

I hereby consent to participation by my child, _____, in the event described above. I understand that this event will take place away from the school grounds and that my child will be under the supervision of the designated school employee on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this field trip, I agree to indemnify and hold harmless: Vista Meadows Academy, any and all affiliated organizations, their employees, agents and representatives, including volunteer and other drivers, from any and all claims, including negligence, arising from or relating to my child's participation in the field trip. This indemnification and hold harmless agreement does not apply to claims for intentional misconduct or gross negligence.

***I UNDERSTAND THAT NO REFUNDS OR CREDITS ARE ALLOWED FOR PRE-PAID FIELD TRIPS REGARDLESS OF CIRCUMSTANCES (e.g., ILLNESS, DISCIPLINARY ISSUES, ETC.)**

(Print Parent's Name) (Parent's Signature) (Date)

Phone # _____

Please return this entire form by: Friday, February 23, 2023 to the main office.