

Appendix 2



Pre-Field trip Parental Declaration Form

Student Name:	Teacher Name:
Parents/Guardians Name:	
Name of field trip	
This form is to be filled in and issued to the teacher/coordinator advance of a students going on a field trip	
Declaration: I have no reason to believe that my child has infectious disease and I have followed all medical and public health guidance.	
Signed _____	
Date: _____	