

**Dayton School District
Student Athletic / Field Trip Form**

I hereby grant the Dayton School District #2 permission to take my son / daughter,
_____ on extra-curricular trips during the 2001-2002 school year.

Parent / Guardian signature

Date

Pledge of Conduct

I, _____, pledge that my conduct will at all times reflect credit upon myself, my parents and my school. I understand that the school rules of conduct apply while on extra-curricular trips.

Student signature

Date

**Washington Interscholastic Activities Association
Request For Waiver Of Accident Insurance Coverage**

- I understand that my child cannot participate in interscholastic athletics unless he/she is covered by the School Accident coverage plan, or a plan provided by the family. I have insurance coverage, the equivalent, or better than the Washington State Industrial Insurance Fee Schedule for doctor's services or hospitalization, and will continue to keep it in force through out the sports season; therefore, I do not wish to enroll _____, son/daughter, in the School Accident coverage plan. The name of the company providing the coverage is _____.
- I understand that my child cannot participate in interscholastic athletics unless he/she is covered by the School Accident coverage plan. I have enrolled _____, and paid the plan premium for the School Accident coverage plan.

Parent / Guardian Signature

Date