Your Educational Partner of Choice
BOCES 2

Monroe 2–Orleans
Board of Cooperative Educational Services
Thomas K. Putnam, Ed.D., District Superintendent

7310F.1

Dear Parent/Legal Guardian

Your signature on the lower portion of this letter is authorization for your student to attend all program-related field trips from September through June. A notice will be sent home prior to each field trip announcing the time and details. In the event of an all-day field trip, home schools and transportation will be notified, and you will be informed of costs, such as lunch and schedules, etc.

Please know that BOCES is not liable for any cost or expense incurred by an individual student, parent(s), staff, teacher, or others due to the withdrawal or cancellation of the trip, for whatever reason or for the additional costs for parent(s) or student making or changing the transportation BOCES pre-arranged.

Please note that all field trip information will be sent electronically, so please make sure that your most updated information is provided below. Please return this form to [NAME OF PROGRAM] by [DATE].

Student Name:_____ **Name of Program:**_____

Home School District:_____**Name of Teacher:**_____

Parent/Legal Guardian Name:_____

Telephone Number:_____ **Email Address**_____

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

By granting permission we waive any and all liability whatsoever and hold Monroe 2-Orleans BOCES harmless against any and all injuries, damages, detainments, deportations, arrests, claims, fees, expenses, costs and the like, whether personal or real property, or death in connection with travel to/from the field trip and during the field trip.

In the event the trip is out of the country, complete the following:

I/we understand and acknowledge this trip is out of the country of the United States of America. I/we agree to waive and hold BOCES harmless against any and all injuries, delays, arrests, detainments, deportations, searches, impoundments, illnesses, diseases, terrorist acts, fatalities, hostage situations, kidnappings, or the like and any and all additional expense in conjunction with travel outside the United States of America. I/we understand and acknowledge that we are solely and financially responsible for the supplying of a passport and/or any and all required immunizations for travel abroad. I/we will sign a permission form to be used at the border allowing Monroe 2-Orleans BOCES to escort our student out of the country.

In case of emergency please notify: _____ at phone number _____

Parent/Legal Guardian Signature:_____ Date:_____

Revised: 5/20/2025