



1217 John B. White Sr. Blvd.
Spartanburg, SC 29306

864-576-2234

Fax: 864-587-9623

www.EddlemonSDA.com

Field Trip Permission Form

2020-2021

[Pupil's Legal Name]: _____ has my permission to attend school functions and trips off campus as sponsored by his/her teacher during the school year.

Parent/Guardian Signature: _____

Date: _____

EMERGENCY CONSENT

My signature below certifies that the staff of Eddlemon Adventist School is authorized to seek medical care for _____ in the event of a medical emergency.
Pupil's Legal Name

Parent/Guardian Signature: _____

Date: _____

Child's Doctor: _____ Phone: _____

Child's Dentist: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Emergency Contact: _____ Phone: _____