



# Pickering High School

180 LeBleu Road

Leesville, LA 71446

337-537-1555 office 337-537-3019 fax

We the undersigned parents of \_\_\_\_\_ do hereby consent to said children being taken to \_\_\_\_\_ on \_\_\_\_\_. Should the need for medical treatment arise, the trip sponsor has the right to seek medical services as necessary.

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Date

*"Home of the Red Devils"*