

**DEUTSCHE SAMSTAGSSCHULE HOUSTON
GERMAN SATURDAY SCHOOL HOUSTON**

**At Christ the King Lutheran Church
2353 Rice Blvd.
Houston, Texas 77005**

Permission Form 2009/2010

I give permission for my child, _____
to receive medical treatment from a physician or another qualified medical
personnel in case of emergency.

Allergies/ Health concerns/Helpful Information: _____

Date

Parent or Guardian

School Trips/ Classes

_____ has my permission to participate in all
regularly scheduled activities and trips within the City of Houston during the
school year 2009/2010. It is my understanding that beyond taking all
reasonable precautions for the supervision and safety of its students the
school does not assume responsibility in the event of an accident during the
course of classes or a scheduled trip. I will not hold the school or its teachers
or administrators liable in case of an accident during school hours either at
the school or on a trip.

Date

Parent or Guardian