

CHARLES M. RUSSELL HIGH SCHOOL  
228 17TH AVE N.W.  
GREAT FALLS, MONTANA 59404  
(406) 268-6100  
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DICK KLOPPEL, Principal  
KERRY PARSONS, Associate Principal  
SUSAN QUINN, Associate Principal  
JULIE TRAMELLI, Associate Principal  
JENNIFER PACKER, Special Ed Coordinator

Dear Parent/Guardian:

During the school year some classes at CMR will be involved in a variety of projects and field trips. In some cases, these projects will be done within the classes at CMR. However, the class may have “on site” projects and field trips within the community to provide students with valuable, practical experiences in life skills. **Participation in “on site” projects and field trips means that transportation will not always be provided by the School District. Your child may choose to drive or ride with another student, take public transportation, or walk.**

In order for your child to participate in these off-campus activities which do not involve School District transportation, your consent is required. Please read the following consent form below and **INITIAL** beside each line you approve of before returning it to the instructor. If you have any questions, please feel free to contact either the instructor or Dick Kloppel, Principal, at 268-6100.

Instructor: \_\_\_\_\_ Phone#: \_\_\_\_\_

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**STUDENT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CLASS:** \_\_\_\_\_ **PERIOD:** \_\_\_\_\_

1. I give my permission for my son/daughter to drive to “on site” or field trip projects in connection with his/her participation in a CMR activity/class. This permission includes the following means of transportation (please **INITIAL** beside all that apply):

- \_\_\_\_\_ Drive his/her own vehicle
- \_\_\_\_\_ Transport other students in his/her vehicle
- \_\_\_\_\_ Ride in a vehicle driven by another class member
- \_\_\_\_\_ Ride on public transportation

2. If my son/daughter will be driving to and from “on site” projects or field trips, I certify that he/she has a valid operator driver’s license and the vehicle which he/she will be driving has and will have minimum liability insurance as required by Montana Law.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_