

Catholic Mutual... "CARES"

PARENTAL/LEGAL GUARDIAN PERMISSION SLIP FOR FIELD TRIP PARTICIPATION

Dear Parent of Legal Guardian:

Your son/daughter, guardianship, is eligible to participate in a school-sponsored activity that requires transportation to a location away from the school site. This activity will take place under the guidance and supervision of the employees from St. Laurence School. A brief description of the activity follows:

Curriculum Goal: _____

Destination: _____

Designated Supervisor: _____

Date and Time of Departure: _____

Date and Anticipated Time of Return: _____

Method of Transportation: _____

What is the cost & what to bring:

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As a parent or legal guardian, you remain fully responsible for any legal responsibility, which may result from any personal actions taken by the named student.

I hereby consent to participation by my child _____, in the event described above. I understand that this event will take place away from the school grounds and that my child will be under the supervision of the designated school employee on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

Parents' Name: _____

Parents' Signature: _____

Address: _____

Emergency Contact and Phone Number: _____

Name (first and Last)

Phone Number

Please return this form by: _____