

PARENT/LEGAL GUARDIAN PERMTSSION SLIP FOR FIELD TRIP PARTICIPATION
ARCHDIOCESE OF ATLANTA

Dear Parent or 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. This activity will take place under the guidance and supervision of employees from St. Thomas More School. A brief description of the activity follows:

Curriculum Objective: _____

Designated Supervisor of Activity: _____

Date and Time of Departure: _____

Date and Anticipated Time of Return: _____

Method of Transportation: _____

Lunch Provisions: _____

Student Cost: _____

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and acceptance of liability and return it to your child's Day Camp teachers by _____. As 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 request and hereby grant permission for my child, _____ to participate in the above described field trip. 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 date. I further consent to the conditions stated above on participation in this event, including the method of transportation.

Parent/Guardian Signature

Date

IN CASE OF EMERGENCY, TELEPHONE NUMBERS TO REACH PARENT/GUARDIAN:

OFFICE _____ CELL _____ HOME _____

ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED. NO FAXED OR ELECTRONICALLY RECEIVED PERMISSION SLIPS WILL BE ACCEPTED.