

**SS. PETER & PAUL SCHOOL
FIELD TRIP PERMISSION SLIP**

Dear Parent/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 employees from Ss. Peter & Paul School. A brief description of the activity follows:

Curriculum Goal: _____

Destination: _____

Designated Supervisor of Activity: _____

Date & Time of Departure: _____

Date & Time of Return: _____

Method of Transportation: _____

Student Cost: _____

I hereby request 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. I further understand and agree that I assume full responsibility for any loss or damage to property, or for bodily injury to others, caused by the above named child, whether by accident or intent. In the event that my child requires medical care while participating in the activity, I assume responsibility for payment of all expenses associated with such care.

I have read the above form; I fully understand and consent to its terms.

Parent/Guardian Signature

Emergency Phone Number

Return this complete form by _____