

ST. THOMAS THE APOSTLE SCHOOL
PARENT PERMISSION FOR FIELD TRIP PARTICIPATION

Dear Parent or Legal Guardian:

Your child is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of employees from St. Thomas the Apostle School. A brief description of the activity follows:

Name of Event: Farmer's Market

Destination: Fulton Farmer's Market

Designated Supervisor of Activity: Holly Lake and Kelly Donohue

Date and Time of Departure: Friday, September 30, 2011, 8:30 AM

Date and Anticipated Time and Location of Return: Friday, September 30, 9:45 AM

Method of Transportation: our little feet

Student Cost: each child bring around \$5 to spend at the market

If you would like your child to participate in this event, please complete, sign, and return this form to school by **Monday, September 26.**

Statement of Consent

I hereby consent to participation by my child, _____, in the event described above scheduled for **Friday, September 30**. I understand that this event will take place away from the school grounds. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this event, I agree to waive and release, and indemnify and hold harmless St. Thomas the Apostle School, any and all affiliated organizations, its/their employees, agents, representatives, volunteers and drivers, from any and all claims I or my child may have, excluding claims for intentional misconduct or gross negligence, arising from or relating to my child's participation in this event.

I authorize St. Thomas the Apostle School to obtain necessary medical treatment for my child in case of illness, injury or accident. List allergies, medication, contacts or other pertinent comments:

During this event, I can be reached at () _____.

I certify that I am the (check one) _____ custodial parent _____ legal guardian of the minor child named above and I agree to the above terms for myself and for my minor child.

Print Parent's Name

Parent's Signature

Date

Check the box if you can come with us!!