Off-site/Field Trip Permission Form

School/Parish/Program Name Anchor YM

Date Event Approved by Supervisor 1/3/19

Person in Charge: Zeke Mientkiewicz Grades: 6-8th

Event and Purpose: EDGE Ski Trip

Date(s) of Event: 2/1/19 Departure Time: 4:00 PM Time of Return: ~9:00 PM

Cost of the Event: $37, Covers pass +dinner Form of transportation: Volunteer Drivers

If private passenger autos (volunteers) are specified, will you be able to drive?

_____ Yes*, I will be able to drive and accommodate ___ students (a seat belt is required for each student and no child is to be seated in the front seat of a car equipped with a passenger side airbag, unless old enough according to manufacturer's recommended age.) *Drivers will be notified after all slips are returned.

Section 1 - By signing this section, I (parent/guardian) certify that I request and give my permission for _____ (student/participant) to attend this event. Further, I have previously completed the *Annual Parental/Guardian Consent Form and Liability Waiver* and agree to the conditions as set forth.

Parent/Guardian Signature: _____ Date: _____

Contact Phone number(s) _____

Section 2 - Nonprescription Medication Permission - By signing this section, I hereby grant permission for nonprescription medication (i.e. ibuprofen, Tylenol, throat lozenges, etc.) to be given to my child.

Parent/Guardian Signature: _____ Date: _____

Section 3 - Please list any medical information important for the adult in charge to know and/or any changes in this child's medical condition or emergency contact information since the completion of the *Annual Parental/Guardian Consent Form and Liability Waiver*.

_____

_____

Archdiocesan Policy 5141 covers the administration of prescription medication; contact the program administrator for additional information.

Please return this permission slip by 1/30/19

Supervisor's Signature _____ Katie Patrizio

(Principal, C/DRE, Youth Director, Pastor, etc.)

This is the only permission slip that will be accepted for this Event

✂ ---------- ***Please detach and save for your information/reference*** ---------- ✂

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