

# PARENT PERMISSION FORM

Dear Parent or Legal Guardian:

Your son/daughter 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. Patrick's Church. A brief description of the activity follows:

**Name of Event:** Middle School Service Saturday

**Destination:** Meet at St. Patrick's and we will walk to LOVE INC. of Grand Haven

**Designated Supervisor of Activity:** Beth Cyr

**Date & Time of Departure:** November 21<sup>st</sup> 9:45 AM

**Date & Anticipated Time of Return:** November 21<sup>st</sup> 12:15PM

**Method of Transportation:** We Will Be Walking There.

**Student Cost:** FREE

**What to Bring:** Bring You, A Friend, and A Servants Heart!

**If your child is able to participate in this event, please complete, sign, and return the following statement of consent and acknowledgement on the day of November 19<sup>th</sup>.** 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 hereby consent to participation by my child, \_\_\_\_\_, in the event described above. I understand that this event will take place away from the church grounds and that my child will be under the supervision of the designated church employee on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

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(Print Parent/Guardian Name)

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(Parent/Guardian Signature)

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(Date)

## Emergency Contact

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship to Minor

\_\_\_\_\_  
Phone Number