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**PARENT PERMISSION FORM FOR FIELD TRIP PARTICIPATION**

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 teacher/s from the Elk County Catholic School System. A brief description of the activity follows:

Name of Event: Educational Purpose:

Destination: Designated Supervisor of Activity: Date and Time of Departure: Date and Time of Return: Method of Transportation: Student Cost: If you would like your child to participate in this event, please complete, sign and return the following

statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for any legal responsibilities which may result from any personal actions taken by the named student.

I hereby request that my child, , participate 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 teacher/s on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

(Parent/Legal Guardian Signature) (Date)

 No, I do not want my child to participate in the event described above. I understand that instead of participating in the field trip, my child will attend school.

(Parent/Legal Guardian Signature) (Date)