



## **PERMISSION SLIP**

I, \_\_\_\_\_ request, and give my permission for my son/daughter \_\_\_\_\_ to attend a field trip to \_\_\_\_\_ on \_\_\_\_\_ (date) I understand that a bus will be used to transport students to and from St. Joseph School, and that students will be gone from approximately \_\_\_\_\_ to \_\_\_\_\_.

I have received the necessary information and instructions required by the person in charge and hereby release teachers, the principal, and the pastor from any and all liability for any injury occurring while my child is on this trip, and waive any claims against them.

In case of emergency, I give my permission for my son/daughter to receive any medical care or attention deemed necessary by a licensed physician. Except in extreme emergency, no medical procedures will be approved by the chaperones without contacting a parent or guardian.

\_\_\_\_\_  
**SIGNATURE OF PARENT OR GUARDIAN**      **DATE**

**MEDICAL INSURANCE CARRIER AND ID NO.**

\_\_\_\_\_