ALL SAINTS CATHOLIC ACADEMY Field Trip Permission Form
Grade_Preschool Teacher _ Resetar/Baker/Jamrosz Home Room <u>РКЗ/РК4</u>
Your child's class will be taking a field trip on <u><b>Tuesday, January 29, 2019</b></u> (Date) to visit <u>Mother Goose Show</u> . The educational benefit of this experience will be to
_learn Mother Goose Nursery Rhymes _which ties in with our _Literacy _ curriculum.
We will leave school atN/A and arrive back byN/A There will be5 teacher(s) and0_ chaperone(s) traveling with the class. The cost of the trip will be \$5.00 (pay by Cash or Check ONLY)
<ul> <li>Students <u>WILL</u> be in uniform for the field trip.</li> <li>Students will <u>NOT</u> be in uniform for the field trip.</li> <li>Students may <u>NOT</u> bring their cell phones.</li> <li>Students should bring a brown bag lunch to eat at the event – no lunch boxes.</li> <li>Students will eat lunch at school.</li> </ul>
Please return the signed permission slip with the money by1-24-19
(Date)
I request that All Saints Catholic Academy take my child,
on a field trip to Home Room
I hereby release and indemnify All Saints Catholic Academy, its staff, volunteers and the Diocese of Joliet from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.
RELEASE: If emergency treatment is required, and if parents or legal guardian can not be reached immediately, your signature in the space provided below empowers the school authorities to exercise their judgment to transport the child to the hospital emergency room.
Signature of Parent or Guardian:DateDate
AddressCity
Phone number where I can be reached during the event ( )
For office use only: Amount Rec'd: Check Number: Cash Amount: