

**DIOCESE OF MANCHESTER
HOLY TRINITY CATHOLIC SCHOOL- PERMISSION SLIP**

ACTIVITY:

TRANSPORTATION:

DATE OF ACTIVITY:

DEPARTURE TIME:

PLANNED RETURN TIME:

NAME OF MINOR CHILD/WARD _____

(Please Print)

Please allow my child/ward to participate in the activity listed above. My child/ward is physically fit and capable of taking part in this activity.

I agree to have my child transported via ambulance and/or treated for emergency medical or dental problems if an emergency arises. I accept full responsibility for all medical expenses incurred as a result of my child/ward's participation in this program.

On the lines below I have listed any medical condition, physical disability, allergy to medicine, etc. which is relevant to rendering medical care to my child if s/he needs emergency medical care:

During the time of this activity, I can be reached at _____
(Telephone Number)

Signed this _____ day of _____, 20____.

Parent/Guardian name (print)

Parent/Guardian (signature)

FOR ADULT CHAPERONES:

I voluntarily agree to assist in the above activity. I give permission to be transported via ambulance if a medical emergency should arise. I accept full responsibility for all medical/dental expenses that may be incurred as a result of my participation in this program.

Signature
Permission Slip

Date

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DETACH AND KEEP THIS PAGE FOR REFERENCE

**** Parents or guardians whose children require medication during the school day should refer to the Guidelines for Administration of Medication section of the Health/Medical policies in the Holy Trinity School Handbook for specific information regarding field trips.**

A nurse will not usually be available to join field trips, therefore, for every field trip it will be the parent's responsibility to communicate with the teacher how and when to administer any necessary medications. **

Holy Trinity School Field Trip Policies

A written permission form issued by the school must be signed and given to the teacher no later than one day prior to trip. Verbal permission granted in person or by phone, or a hand written note is not acceptable for a field trip; **a school form must be filled out and signed by a parent or guardian.** Parents who plan to chaperone the field trip should also sign the bottom section of the permission slip, marked "FOR ADULT CHAPERONES". All parent drivers for field trips must have a completed, signed *Field Trip Verification of Insurance* form with verification of adequate insurance on file in the school office. A copy of both of these forms are included in the appendix of the handbook and also can be obtained through the office. Parents should follow their automobile manufacturer's recommendations regarding the use of a passenger seat with a driver's side air bag. All students must have a seat with a working seat belt, and should be buckled at all times. **Once a parent driver leaves the school grounds with students in his/her car he or she should travel directly to the field trip location with no stops for gas, ice cream, the bank, etc.** Please remember to stay with the group and follow the teacher's instructions regarding the monitoring of students. **Use of tobacco products by parent drivers either during transport or at the site of the field trip is prohibited.**

Activity:

Date of Activity:

Departure Time:

Planned Return Time: