



ST. MARK CATHOLIC SCHOOL

Field Trip Permission Form

This form must be signed and returned in order for your child to participate in the field trip listed below. Please fill out all information.

Students Name: _____ Date of Field Trip: _____

Destination: _____

Cost per Student: \$ _____

Departure time: _____ Arrival back at school: _____

Method of Transportation: _____

Emergency Number : _____
(where parent or guardian can be reached during field trip)

My child is allowed to participate in the field trip listed above. I understand that they are expected to behave in an orderly and respectful manner.

I hereby release from liability and hold harmless St. Mark Catholic School, its employees, and/or chaperones associated with this field trip from any and all injury that results from this trip. I certify there have been no changes in my child's medical matters since previously disclosed.

As legal guardian/parent, I remain legally responsible for any personal actions taken by the above "student".

Signature of Parent/ Guardian: _____ Date: _____

- I am willing to chaperone for the field trip. Cost if Applicable: _____
- I am approved to volunteer at St. Mark Catholic School.
- I am willing to drive for the field trip.
- I will fill out all appropriate Field Trip Driver information, including providing a current copy of my driver's license and insurance.