



ST. MARK CATHOLIC SCHOOL

Live, Learn, and Grow

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.

Camp Participants Name: _____

- | | |
|--|--------------------------|
| <input type="checkbox"/> Madison County Public Library | <input type="checkbox"/> |
| <input type="checkbox"/> Million Park | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

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/trips 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.

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

Signature of Parent/ Guardian: _____ Date: _____