

**PARENT PERMISSION FORM FOR FIELD TRIP PARTICIPATION**

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a parish-sponsored activity requiring transportation to a location away from the church premises. This activity will take place under the guidance and supervision of employees from Saint Elizabeth Ann Seton.

**Name of Event:** 2018 Martin Luther King 'Day of Service' with the Archdiocese of Detroit

**Destination:** Sacred Heart Church 3451 Rivard, Detroit, MI 48207

**Designated Supervisor of Activity:** Terri Konwinski

**Date and Time of Departure:** Saturday, January 13, 2018 8:15 am @ S.E.A.S.

**Date and Time of Return:** Saturday, January 13, 2018 3:15 pm @ SE.A.S.

**Method of Transportation:** carpool? Provide own transportation

**Student Cost:** \$5.00 Lunch will be provided

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for the actions and conduct of your child.

\*\*\*\*\* **STATEMENT OF CONSENT** \*\*\*\*\*

I hereby consent to participation by my child, \_\_\_\_\_, in the event described above. Name of event: \_\_\_\_\_ I understand that this event will take place away from the parish grounds and that my child will be under the supervision of the designated parish employee on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this field trip, I hereby agree on behalf of myself and my child, to release Saint Elizabeth Ann Seton Parish, the Roman Catholic Archdiocese of Detroit and any and all affiliated organizations, their employees, agents and representatives, including volunteer drivers (collectively "Releases"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the field trip. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releases' from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the field trip. This release of indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

During this activity, I can be reached at (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(Print Parent's Name) \_\_\_\_\_

(Parent's Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

**Please return this form to the parish office or Terri Konwinski by 1/7/18**