

## Archdiocese of Atlanta Field Trip Permission Slip

Dear Parent/Guardian:

Your son/daughter's Cross Country Team will be participating in an off-campus practice as needed. This field trip will take place under the guidance and supervision of teachers and parent volunteers from St. Joseph Catholic Parish School. A brief description of the activity follows:

Grades: 5th-8th Cross County Runners  
Educational Purpose of Trip: Practice  
Destination: 3 mile loop  
Date and Time of Departure: as needed  
Date and Time of Return: as needed  
Method of Transportation: running/walking

Please complete, sign and return the following permission slip.

Date: 16-17 Season

I hereby give my child \_\_\_\_\_ permission to attend the above listed field trip.

I hereby waive and release any claim against the St. Joseph Catholic Parish School for any injuries suffered by my child during the above listed field trip. In the event of an injury suffered during the transportation to and from the school, I agree to look solely to the insurance carrier providing insurance on the transporting vehicle for compensation.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Emergency Cell Number

**Deadline: Return Form Prior to Activity**

If you would like to run/walk with us, please let us know. Thanks for your help!!