

\* Due by Monday December 4, 2017

\* Tuition Must Be Current

Diocese of San Bernardino/Riverside  
School Activity/Field Trip  
Parent Consent Form

School: St Edward

I/We the Parent(s)/Guardian(s) of \_\_\_\_\_  
request that the school allow my/our son/daughter to participate in the following  
school activity: Basketball Team - After School Sports

Date of Activity/Field Trip: Dec. 2017 - March 2018 Grade: 5, 6, 7, 8

Teacher/Coordinator: Ms. Cendijas

Destination: School Playground

Time Leaving School: 3:00 pm

Estimated Time of Return: 5:00 pm

Reason For Activity/Field Trip: Basketball Team in ICSL

Means of Transportation: Walking

Cost Per Student: \$45 + Uniform Cost To Cover: please see attached

Student Needs To Bring: Water, tennis shoes, school shorts + P.E. shirts

In consideration for making the arrangements for this activity/field trip, we hereby release and save harmless the school, its employees, officers and agents from any and all liability, suits, causes and claims arising to my/our son/daughter as a result of, or in connection with, this activity/field trip.

\*In case of injury or related emergency, I authorize that first aid be administered to my child by a person qualified to render such service, if deemed necessary by school faculty, staff, and/or chaperone. Please note allergies, special conditions: \_\_\_\_\_

Principal's signature Mrs. Lister Date 11/7/17

\*\*I/We understand that any insurance benefits that are effective have limited application  
Yes, \_\_\_\_\_ has my/our permission to attend the activity/field trip  
On \_\_\_\_\_ (date)

No, \_\_\_\_\_ may not attend activity/field trip  
because \_\_\_\_\_

Students Date of Birth \_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Home Telephone \_\_\_\_\_

Yes, I can drive, I have seatbelts for \_\_\_\_\_ children. I have filled out the Driver Information form and have the required insurance of \$100,000/\$300,000.