



St. Edward School

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

School: _____

I/We the Parent(s)/Guardian(s) of _____

Request that the school allow my/our son/daughter to participate in the following

School activity _____

Date of Activity/Field Trip: _____

_____ Grade: _____

Teacher/Coordinator _____

Destination: _____

Time Leaving School: _____

Estimated Time of Return _____

Reason for Activity/Field Trip _____

SLE: _____

Means of Transportation: _____

Cost Per Student: \$ _____ Cost to Cover _____

Student Needs to Bring: _____

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 not allergies, special conditions: _____

Principal's signature _____

Date _____

**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 _____

Parent/Guardian signature: _____ Date: _____

Work Telephone: _____ Home Telephone _____