

**Bellarmino Preparatory School
2019 Sophomore Boys Retreat
Permission Slip**



This form must be completely filled out and signed by a parent/guardian and returned to Mr. Barnes or Mr. Mayne by **Friday, September 27th**.

Student Name (print): _____

**Parental/Guardian – Please complete the following information:
Carefully read the liability information and sign below**

First and last names of parents or guardians: _____

Parents' phone numbers: Home _____ Work (M) _____ Work (D) _____

Cell (Mom) _____ Work (Mom) _____

Cell (Dad) _____ Work (Dad) _____

A brief description of the activity follows:

Event: Sophomore Boys Retreat

Location of event: Island Lake

Individuals in charge: Mr. Barnes and Mr. Mayne

Mode of transportation to and from event: Bellarmine buses

Cost: \$70

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the named minor participant.

I agree on behalf of myself, my child named herein, or our heirs, successors and assigns, to hold harmless and defend Bellarmine Preparatory School, its officers, directors and agents, chaperones, or representatives associated with the event, from any and all actions, claims, demands, damages, costs, expenses and all consequential damage arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the schools, its officers, directors and agents, or representatives associated with the event for reasonable attorney's fees and expenses arising therewith.

I have read the above information and give permission for my student to participate in the field trip activity as described above.

Student Name: (Please print) _____

Parent/guardian signature: _____

Date: _____ **Emergency Phone:** _____

Any medical conditions and/or medications teachers/school should be aware of:

Any food allergies teachers/school should be aware of: