

**PARENTAL PERMISSION FOR ST. MARY OF THE MOUNT FIELD TRIP**

**INFORMATION ABOUT THE TRIP**

Trip: \_\_\_\_\_ Cost: \_\_\_\_\_

Date: \_\_\_\_\_

**INFORMATION ABOUT MY SON/DAUGHTER**

Name of Youth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Home Address: \_\_\_\_\_

Name of Parent/ Guardian: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**MEDICAL INFORMATION:**

Please list all information pertaining to allergies, diet, special medications, health conditions or any other information necessary in an emergency situation. Explain fully on a separate sheet of paper.

**CONSENT AND RELEASE:**

I hereby request and give my permission for my youth to participate in the above event. I understand and assume the risks inherent with this event from other parties, but I also understand that all reasonable care and supervision will be exercised to provide for the general well being of my youth. I, individually and on behalf of my youth named above, do hereby release, covenant not to sue, and save harmless: The Most Reverend Bishop Joseph Martino, Bishop of the Diocese of Scranton; the parish of St. Mary of the Mount; and all employees, agents and volunteers for this event, from any and all claims for any and all harm arising to my youth as a result of their participation in this event.

**TRANSPORTATION:**

I hereby allow the following transportation to be used for my son/daughter participating in the above event:

Yes \_\_\_\_\_ No \_\_\_\_\_ My son/daughter may ride the transportation provided by St. Mary of the Mount Parish.

Parent Guardian \_\_\_\_\_ Date.: \_\_\_\_ / \_\_\_\_ / \_\_\_\_