

**Archdiocese of Omaha**  
**Parent Permission Form for Field Trip Participation**

Date: December 1, 2016

School Name and Address: St. Columbkille School  
224 E. 5<sup>th</sup> Street  
Papillion, NE 68046

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a school/parish sponsored activity requiring transportation to a location away from the school/parish grounds. This activity will take place under the guidance and supervision of employees from St. Columbkille School/Parish. A brief description of the activity follows:

Destination: **Skate Daze**

Designated supervisor(s) of activity: **Mrs. Ivener, Mrs. Hill, Mrs. Monico, Mrs. Watson, Ms. Moline**

Date and time of departure: **Thursday, December 21, at 8:15 AM**

Date and anticipated time of return: **Thursday, December 21 at approximately 11:00 AM**

Method of transportation: **Bus**

Student cost:: Bus: 0 Activity: 0 ⇒ **Total Cost: 0**

Educational purpose: Building Community

**The cost of this field trip was included in the activity fee which was to be paid at the beginning of the school year. If this fee has not yet been paid, it must be paid before the student may participate in this field trip.**

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As a parent or legal guardian, you remain fully responsible for any legal responsibility which may result from personal actions taken by your child.

We hereby consent to participation by our child, \_\_\_\_\_, in the event described above. We understand that this event will take place away from school/parish grounds and that our child will be under the supervision of the designated diocesan/parish/school employee on the stated dates. We further consent to the conditions stated above on participation in this event, including the method of transportation.

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Signature of Parent/Legal Guardian

Date

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Address

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Emergency phone number