PERMISSION FORM FOR FIELD TRIP PARTICIPATION

St. Daniel Catholic Community

Dear Parent or Legal Guardian:

Your child is eligible to participate in a school/parish-sponsored activity requiring transportation to a location away from the parish premises. This activity will take place under the guidance and supervision of volunteers from St. Daniel Parish. A brief description of the activity follows:

Name of Event: North End-Soup Kitchen 9am – 1pm

Cook and serve lunch for the hungry clients of North End Soup Kitchen

Destination: North End Soup Kitchen 735 E. Stewart St. Flint, MI 48505

Designated Supervisor of Activity: Parents needed to lead and chaperone.

Date: Sat. Oct 12, 2019 – Meet at 8:45am at North End Soup Kitchen

Method of Transportation: Everyone will meet at the Soup Kitchen

NO CARPOOLING OFFERED FROM ST. DANIEL

Student Cost: None-Please bring a gift of canned fruit, spaghetti sauce, elbow or

egg noodles, regular spices, chicken or fish seasoning, canned

sweet peas or carrots for the homeless.

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 to the Parish by **Monday, Oct 7, 2019**. As parent or legal quardian, you remain fully responsible for the actions and conduct of your child.

Space is limited to the first 12 people (including adults) who turn in permission form. Please, no children under 10 years old.

WEAR A HAT OR BASEBALL CAP, LEAVE PURSES AT HOME

North End Soup Kitchen	10-12-19	STATEMENT OF CONSENT	
	this event wil	/ child I take place away from the parish grounds n in this event, including the method of tra	

In consideration of my child being allowed to participate in this event, I hereby agree on behalf of myself and my child to release St. Daniel Parish, the Roman Catholic Archdiocese of Detroit, any and all affiliated organizations, their employees, agents, representatives (collectively "Releasees"), from any and all claims, including negligence, which may be asserted by me or my child, or on behalf of my child arising from or relating to my child's participation in the field trip. In the event this release on behalf of myself and/or my child is held to be invalid or unenforceable, I hereby agree to indemnify and hold harmless Releasees from any and all claims, including negligence which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the field trip. This release of indemnification does not apply to claims for intentional misconduct or gross negligence; nor does this release or indemnification apply to the extent of commercial insurance coverage for any claim, but this Release or Indemnification shall apply to the extent of any self-insurance or deductible applicable to any claim.

(Parent's Signature)	(Date)	(Email address)	
(Print Parent's Name)			
During this event I can be reached at t	he following phone numb	er:	
to the extent of any self-insurance or d	leductible applicable to a	ny ciaim.	
to the extent of any self-incurance or d	loductible applicable to a	ov claim	