

ARCHDIOCESE OF BALTIMORE
DIVISION OF CATHOLIC SCHOOLS
320 Cathedral Street
Baltimore, Maryland 21201

To: Parent(s)/Legal Guardians
From: St. Philip Neri School

Date: 10/08/2019
Principal: Kate Daley

Re: Field Trip Permission

We have arranged for your child to participate in a planned field trip experience to:

Montpelier Farms, 1720 Crain Highway, Upper Marlboro, MD

The following provisions have been made and approved by the school:

Date: October 24, 2019 Cost: (\$35 child) (\$10 Chaperone)

Departure Time: 9:00am Return Time: 1:30pm

Type of Transportation: School Bus

Supervisory Personnel: Mrs. Susan Spitzer, Mrs. Heather Horton and Mrs. Anne Muha & volunteer certified chaperones. There is a limited number of chaperones that may ride on bus do to seating availability. This will be on a first come first served basis.

Dress Requirements: gym uniform

Meal Arrangements: Please pack a brown bag lunch.

Emergency Phone Number to contact supervisory personnel during the trip: 410-859-1212 ext. 200

Reasonable care will be taken by the supervisory personnel to insure the safety of your child. It is absolutely essential, however, that you, as parent or legal guardian, give written permission for your child to participate in this activity. Therefore, please sign the slip below and have your child return it to his/her teacher no later than October 18, 2019. If your child does not return the signed slip, he/she will not be able to take advantage of this opportunity. **The cost of the bus and destination of field trips are paid in advance, money for field trip is not refundable.**

(Please detach and return this portion to your child's teacher.)

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Release and Waiver

In consideration of my child participating in this field trip experience, I hereby release St. Philip Neri School, Archbishop William E. Lori, Roman Catholic Archbishop, a corporation sole, and their agents, employees and principals, of and from any and all liability, claims, demands, actions and causes of actions whatsoever, arising out of or related to any loss, damage, or injury that may be sustained by my child or children. I hereby grant permission for my child to participate in the trip to Montpelier Farms, 1720 Crain Highway, Upper Marlboro, MD.

I acknowledge receipt of the information describing the details of the field trip experience. **The cost of the bus and destination of field trips are paid in advance, money for field trip is not refundable.**

Signature of Parent/Legal Guardian _____ Date: _____

Parent/Legal Guardian phone number on day of trip: _____

(If applicable) **Chaperone Information:**

Yes, I can chaperone, and I am STAND trained Name of Chaperone: _____
 No, I cannot chaperone Please Print

(If applicable) Medication(s) to be administered during the field trip: _____

Dosage: _____ Time dosage is to be administered: _____
I hereby authorize supervisory personnel to administer the indicated medication.

Signature of Parent/Legal Guardian _____ Date: _____