

St. Rose Catholic School

Field Trip Authorization

Date ____/____/____

Dear Parents/Guardians;

We are planning a field trip to the _____

on _____. We will be leaving school at _____:_____ and will be returning

no later than _____:_____.

Cost: _____ Spending Money Needed: _____ Suggested Amt.: _____

Sack Lunch Required: _____ Clothing: _____ Uniform _____ Other _____

_____ has my permission to go

with grades _____ to _____ on ____/____/_____.

As a parent or guardian, I release St. Rose School, Parish and Toledo Diocesan Schools, and any associated person or agency from any claims of ordinary negligence, in consideration for the opportunity to participate in this program. Everyone transporting our Parish's youth is required his/her own personal, up-to-date insurance, driver's license (*a copy of both must be on file in the school office*) and to be responsible for the care of our youth.