

Field Trip.docx

Office of Youth Ministry 27 C Street

SLC, UT 84103

Diocese of SLC

FIELD TRIP PERMISSION FORM

Participant's name:		
Birth date:	Gender:	
Parent/Guardian's name:		
Home address:		
Home phone:	Business phone:	
	, grant permission for my ch	
(Parent or guardian's name)		(Child's name)
the parish site. This activity w	uth ministry event that requires tran vill take place under the guidance an John the Baptist Catholic	d direction of parish employees
A brief description of the activ	vity is as follows:	
Type of event: Destination of event:	High School Back to School Picnic	
	Granite Park, 2700 East 10000 South, S	Sandy
Individual in charge:	Liz Canto & Kira Anderson	

Estimated time of departure and return: September 7th, 2024, 12:30 - 3:00 PM

Mode of transportation to and from event: _____ Parent drop off/pick up

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by my child. I agree on behalf of myself, my child, and our heirs, successors, and assigns, to hold harmless and defend the Diocese, the Parish, and their employees, agents, representatives and volunteers, arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith. Additionally, I agree to compensate the Parish and/or the Diocese of Salt Lake City for reasonable attorney's fees and expenses arising in connection therewith. Furthermore, the information contained in the "Consent to Participate in Youth Ministry Program" form is current as of the date of my execution of this form.