

# Archdiocese of Los Angeles Field Trip Permission Slip

To: Sister Kathleen Patrice, Our Lady Of Mount Carmel Parish

I hereby permit \_\_\_\_\_ to participate in the **Youth Day in Anaheim** on **Thursday, February 26<sup>th</sup>**. Students are to meet at **OLMC parking lot at 5 AM**. We will be returning at OLMC around 9 PM. The fee for Youth Day is \$50. If you are unable to pay, please contact Sr. Kathleen Patrice at 969-4868. We need to have the registration and fee returned to the Religious Education Office by Friday, December 12<sup>th</sup>. (Since the registration for Youth Day fills quickly, please send in your form/s and fee as soon as possible).

I agree to direct my son/daughter to cooperate and conform to the directions and instructions of the supervisory personnel in charge of the day.

Should it be necessary for my son/daughter to have medical treatment while participating in this event, I hereby give the Religious Education personnel permission to use their judgment in obtaining medical service for my son/daughter, and I give permission to the physician selected by them to render medical treatment deemed necessary and appropriate by the physician. I understand that any insurance benefits that are affective have limited application.

I agree that in the event my son's/daughter's behavior is inappropriate I will be contacted to pick up my child and I will assume any responsibility for damages done to people or property as a result of my child's behavior.

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Daytime Phone #

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
Cell Phone #