

**Catholic Archdiocese of Atlanta**  
**Our Lady of Mercy Catholic High School**  
**Field trip - Parental / Guardian Consent Form and Liability Wavier**

Name of Participant: \_\_\_\_\_

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Parent / Guardian's Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Home phone #: \_\_\_\_\_

Work # \_\_\_\_\_ Cell # \_\_\_\_\_

I, (Parent/Guardian above), grant permission for my child, (Participant above), to participate in this school event that requires transportation to a location away from the school. This activity will take place under the guidance and direction of school employees. **\*\*Students are expected to prepare all work assigned for classes that occur on the date of the field trip so that they may participate fully in classes in the event of schedule changes or field trip cancellations. Students will be held responsible for assignments and material covered in the classes missed because of field trip attendance.** A brief description of the activity follows:

Type of Event: **Sophomore Retreat**

Destination of Event: **Monastery of the Holy Spirit, Conyers, GA**

Dates: **Tuesday, March 11, 2014**

Cost: **\$5...Please give to Mrs. Consolino in the front office**

Individuals in Charge: **Mr. Tolcher and Father Briese**

Estimated time of Departure and Return: **7:45-2:45**

Mode of transportation to and from event: **Mercy Bus**

As a 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 named herein, or our heirs, successors, and assigns, to hold harmless and defend this SCHOOL (listed above), its officers, directors, and agents and the **ARCHDIOCESE OF ATLANTA**, Georgia, chaperones, or representatives associated with the event, 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, and I agree to compensate the school, its officers, directors and agents, and the Archdiocese of Atlanta, chaperones, or representatives associated with the event for reasonable attorney's fees and expenses arising in connection therewith.

I / We hereby grant permission for publication of group (two or more persons) photo taken at youth events.

Signature of Parent / Guardian \_\_\_\_\_ Date \_\_\_\_\_