

St. Ferdinand School

FIELD TRIP PERMISSION FORM DESTINATION: Chicago Dogs Baseball · Rosemont, 12 DATE: Wed., May 29 GRADE/CLASS: All Grades · Pre-K thru 8th 9.00 AM RETURN TIME: 2:00 TEACHER/SUPERVISOR: All Administration, Teachers, + Stan PURPOSE OF THE FIELD TRIP: To enjoy an end-ofyear outing as a Please note the following GYM Students will wear school uniforms Students may wear casual clothes suited for the field trip and in accord with school procedures Students will bring their lunches (identified with name and grade) Lunch will be provided for the students Students may purchase lunches at their own expense Other: Cost for the field trip is \$ 10 due by Fri, May 10

Transportation

Transporta Please PRINT student's first and last name and date of birth **FIRST NAME** LAST NAME DATE of BIRTH has permission to attend this field trip. I understand that this is an educational trip and a valid extension of the classroom experience. In consideration of the making of arrangements by the school, I release and save harmless the school and any and all school personnel from any and all liability for any injuries, loss, or other claims arising or resulting from the trip. Signature of Parent/Guardian: _____ Date: _____ Daytime Phone Number: _____ Amount Enclosed: _____