

Our Lady of Hungary School  
735 West Calvert Street South Bend, IN 46613 574.289.3272  
**FIELD TRIP PERMISSION AND RELEASE**

**FIELD TRIP INFORMATION**

Class/Grade Level: \_\_\_\_\_ Destination of Field Trip: \_\_\_\_\_  
Purpose of Field Trip: \_\_\_\_\_  
Date/Approx. Time of Departure: \_\_\_\_\_  
Date/Approx. Time of Return: \_\_\_\_\_ Mode of Transport: \_\_\_\_\_  
Overnight Accommodation (if applicable): \_\_\_\_\_  
\_\_\_\_\_  
Additional Information:

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**\*PARENT/GUARDIAN PERMISSION AND RELEASE:**

Parent/Guardian Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_  
Student Name \_\_\_\_\_ Student Age \_\_\_\_\_ Student Grade \_\_\_\_\_

**Check one of the following two options and fill in the blanks:**

- \_\_\_\_ Yes. I have received the Field Trip information concerning the field trip to \_\_\_\_\_  
(fill in Destination) on \_\_\_\_\_ (fill in Date), and request that the school allow my child  
to accompany the class/grade on the field trip.
- \_\_\_\_ No. I have received the Field Trip Information concerning the field trip to \_\_\_\_\_  
(fill in Destination) on \_\_\_\_\_ (fill in Date), and DO NOT request that the school allow  
my child to participate in the field trip. \_\_\_\_\_

In consideration of the child being allowed to participate in this trip, on behalf of my child, my spouse, myself and my child's estate, I hereby recognize that such an activity may expose my child to risks and hazards not ordinarily encountered in school. Further, I hereby release the above names School and the Diocese of Fort Wayne-South Bend, Inc. from any and all claims, judgments, liability for any injury, whether personal or property, that my child, his/her estate, or my spouse now has, ever had or may have due to my child's participation in this trip, that are attributable to the fault of parties other than the School or Diocese; or, to the extent permitted by law, attributable to the fault of the School or the Diocese.

I have instructed my child to follow the rules of conduct as directed by the school.

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

\*A new form must be completed for **each** trip.