

St. Christopher Roman Catholic Church and School

Come...journey, follow and be inspired with us!

December 6, 2017

PARENT/LEGAL GUARDIAN PERMISSION SLIP FOR FIELD TRIP PARTICIPATION

Dear Parent or Legal Guardian:

	to participate in a school-sponsored activity that requires transportation to a tivity will take place under the guidance and supervision of employees from of the activity follows:
Name of event: St. Christopher School Drai	na Production of Alladin Jr.
Educational Objective: to view of drama clu	ub's production
Destination: St. Christopher's St. Edmund C	Campus, Ellicott Creek Road, Tonawanda NY 14150
Designated Supervisor of Activity: Homero	om Teacher
	nuary 14- 2 nd (108), 3 rd , 5 th & 6 th grades nuary 15- PreK, Kind & 8 th grades nuary 16- 1 st , 2 nd (106), 4 th & 7 th grades rformances 8:00-10:30****
Method of Transportation: School Bus	
Student Cost: \$2.00 per student	
	this event, please complete, sign and return the following statement of t, or legal guardian, you remain fully responsible for any legal responsibility taken by the named student.
<u>Please det</u>	ach and return bottom
above. I understand that this event will tak	d, Homeroom # in the event described te place away from the school grounds and that my child will be under the expectation by the stated dates. I further consent to the conditions stated above on ethod of transportation.
PLEASE RETURN SIGNE	D FORM BY: THURSDAY- DECEMBER 20, 2018
Parent Signature	 Date

Believe ~ Seek ~ Realize

Phone Number

Emergency contact name & number