

Father McGivney Catholic High School

Field Trip Release Form

Father McGivney Catholic High School ("FMC	CHS") requests that your child
be allowed to go on the field trip and to return of your child educationally and spiritually.	with FMCHS presently scheduled to depart on because we believe this trip will benefit
	ndards of behavior, as deemed by FMCHS will apply to this trip responsibility and liability for our child while traveling to, from reely assume this responsibility and liability.
	raveling by bus or privately owned vehicles which will be thereby consent to our child traveling to, from, and during this
child's actions or the actions of others. To the g	onsible for any damages or accidents that may result from our greatest extent possible, we release FMCHS and the Diocese of half, from all liability for damages to or caused by our child as a m for any such damages.
Emergency Contact/Medical Information:	
Father/Guardian	Phone
Mother/Guardian	
Address	
	Phone
Medical Insurance Company	
	Policy Number
We hereby also give our consent for our child hereby also give our consent for photographs	d to receive emergency medical care during this trip. We sof our child to be taken and released
Signature(s) of parent/guardian	Date
We hereby allow our student to drive themse be transported by my student (except siblings	lves to and from this event. No other students are allowed to
Signature of parent(s)/guardian	Date
We hereby allow our student to be driven to : listed as "Parent Transporting Students". N	and from this event by the parent (and only this parent) ame of Parent transporting students:
Signature of parent(s)/guardian of student:	