

SMA Spirit

Student Fundraiser and Walk

PARENT PERMISSION FORM

I give _____ permission to
(Student's Name)

participate in the SMA Spirit Student Fundraiser Walk at St. Mary's Academy.
(Activity)

Cost per student: none

TA: _____
(all groups will have multiple adult escorts)

Trip begins: time 9:30 am date October 5, 2018

Trip ends: time 12:30 pm date October 5, 2018

Transportation: walking from SMA, to Waterfront Park, to the Esplanade and home to SMA

Dean of Students

Return this completed form on or before Friday, October 5, 2018

Should an accident or other medical emergency occur during the trip or activity, and the responsible leader is unable to reach a parent or guardian for medical authorization, I hereby give my consent for the responsible leader to authorize necessary hospitalization or treatment, including injections, anesthesia, surgery, and medication.

I agree to be responsible for all debts not covered by the school which are incurred by the student during the trip or activity, and for all the expenses not covered by insurance that are incurred as a result of any accident, illness, or medical emergency involving the student.

Parent/Guardian: _____ Date: _____
(Signature)

Address, City, State, Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____