

Holy Savior Catholic Academy
4640 E 15th Street North
Wichita, Kansas 67208
316/684-2141



To: Parents/Legal Guardian

From: Dr. Shropshire, Principal
Holy Savior Catholic Academy

We have arranged for your child/children to participate in a planned field trip to: **Boys Rites of Passage field trip to Bubba's 33**

Trip Information:
Unit of Study, standard or activity associated with trip
Specific objectives of trip
Follow-up classroom discussion follows each field trip

Date of Trip: **Monday, October 23, 2017**

Departure time: **1:45p**

Return time: **3:00p**

Type of Transportation: Bus

Cost per Student: **FREE**

Teachers/Sponsors Supervising Trip: *Dr. Shropshire & Mr. Brice*

Other Important Information:

Reasonable care will be taken by the supervising personnel to ensure the safety of your child. However, it is essential that you, as a parent/legal guardian give written permission for your child to participate in this activity. Therefore please sign below and return to the teacher no later than _____.

Field Trip Approval

[Signature]
Principal's Signature

9/19/17
Date

Return bottom portion of this permission – Retain top portion for your Information

**PRINT & SIGN THIS PERMISSION SLIP
OR**

STOP BY THE SCHOOL OFFICE TO SIGN THE SIGNATURE FORM

PERMISSION RELEASE & WAIVER

**10/23/2017 – BROP to
Bubba's 33**

I hereby give my express permission as apparent (legal guardian) for my child/children to participate in the described field trip. I have read and completely understand the arrangements. I hereby release Holy Savior Catholic Academy, Holy Savior Catholic Church, and the Catholic Diocese of Wichita a corporation sole, and their agents, employees and principals, of any and all liability, claims demands, action and causes of action whatsoever, arising out of or related to any loss, or injury, that may be sustained by my child or children. I acknowledge receipt of this information sheet.

Parent or Legal Guardian Signature

Date