

Parental Permission Form
Our Lady of Sorrows Church

Dear Parent or Legal Guardian,

Your child is eligible to participate in a parish sponsored activity requiring transportation in the parish van to a location away from the parish campus. This activity will take place under the guidance and supervision of Dc. Dale Crotsley of Our Lady of Sorrows Parish.

Name of the Event: _____

Date of Event: _____

Destination: _____

If you give permission for your child to participate in this event, please complete, sign and return this statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for any legal responsibility which may result from any personal actions taken by the named student.

I hereby consent to participation by my child, _____, in the event described above. I understand that this event will take place away from parish grounds and that my child is under the supervision of the designated employee on the stated dates. I further consent to the conditions stated above on participation in the event, including the method of transportation. In the event of an emergency, I can be reached at _____

LOCATION AND PHONE NUMBER

If I am unavailable _____ has my
Emergency contact
permission to act on my behalf and may be reached at _____.

PHONE

Please list any information that might be helpful to us such as allergies, medications, fears concerns, etc. _____

Child's Physician _____ Phone _____

Print parent name (Guardian)

phone

cell phone

Signature of parent (guardian)

date

Completed form must returned to the OLS Office or scanned and emailed to olsvestal.org.