



Saint Peter's Prep

New Jersey's Jesuit High School Since 1872

Prep Day Permission Slip

I hereby request that the school allow my child, _____, to
Student Name

participate in _____ on _____. I understand that the
Activity / Trip *Date (s)*

mode of transportation for this trip is: Public Transportation School Bus N/A
 Other: _____

The adult chaperone(s) for this trip are: _____

In consideration of the opportunity for my child to participate in the above activity, and as the student's parent or guardian, I hereby release, save harmless, and indemnify the school, its agents, employees and volunteers from any and all liability for ordinary negligence causing any and all injury that my child may sustain during participation in, or as a result of, this trip.

If reasonable attempts to reach the below listed individuals are unsuccessful, I hereby give my consent for the administration of any emergency medical treatment deemed necessary and/or the transfer of the student to the nearest hospital.

Parent Signature *Date*

Parent Name (Printed) *Phone Number*

In the event of an emergency, please contact:

Name *Relationship to Student* *Cell Phone Number*

Name *Relationship to Student* *Cell Phone Number*

As a student of Saint Peter's Prep, I agree to follow the rules of Prep and understand that these rules are in effect the entire duration of this retreat from departure to return.

Student Signature *Date*

Student Name (Printed) *Phone Number*

STUDENT: Submit this signed form (with payment, if applicable) to the teacher responsible for the activity you are interested in attending. Only submit one permission slip. If the activity is full, please see another teacher and sign-up for a different activity. Let Mr. Locricchio know if you have any questions.