

## PARENT/LEGAL GUARDIAN PERMISSION SLIP AND INDEMNITY AGREEMENT

## **MUST BE RETURNED BY: 1/16/25**

| of Child/War<br>/School: Hole<br>/ated Superv<br>y: Basketbar<br>ption of Action<br>of Activity:<br>eaving school<br>y Fee: \$0<br>at needs to relied t | ly Trinity Cativisor of Activial Game @ Sivity: Sports 1/23/25 ol: 3:05p Tillide to meet: hts will get a                                | tholic Schoolity: Mrs. H St. Michael' Event ime returning text messa   | ines & Mrs. s Catholic S ng to schoo Student n age from HT  | School<br>I: approx  | t. 5:30p<br>ide back to HTCS:<br>then we are leaving   |  |
|---|---|--|---|--|--|--|
| School: Holested Supervices: Basketbasetion of Activity: Paving schools of Activity: P                          | ly Trinity Cativisor of Activial Game @ Sivity: Sports 1/23/25 ol: 3:05p Tillide to meet: hts will get a                                | vity: Mrs. H St. Michael' Event ime returning text messa   | ines & Mrs. s Catholic S ng to schoo Student n age from HT  | School<br>I: approx  | ide back to HTCS:  |  |
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| y: Basketba<br>ption of Acti<br>of Activity:<br>eaving school<br>y Fee: \$0<br>at needs to r<br>Notes: Parer<br>he meet.<br>m/Clothing:   | all Game @ Sivity: Sports 1/23/25 ol: 3:05p Tivide to meet: hts will get a  | St. Michael' Event ime returning text messa  | s Catholic S<br>ng to schoo<br>Student n  | School<br>I: approx  | ide back to HTCS:  |  |
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| y Fee: \$0  It needs to r  Notes: Parer ie meet.  m/Clothing:   | ide to meet:<br>nts will get a<br>Basketball B  | text messa   | Student n   | eeds to ri   | ide back to HTCS:  |  |
| nt needs to r<br>Notes: Parente meet.<br>m/Clothing:  | nts will get a<br>Basketball B  | text messa   | age from HT   |  |  |  |
| Notes: Parer<br>ne meet.<br>m/Clothing:   | nts will get a<br>Basketball B  | text messa   | age from HT   |  |  |  |
| ne meet.<br>m/Clothing:   | Basketball B  | Ball or Chee   |   | CS will w  | rhen we are leaving  | g St. Michael's  |
|   |   |  | er Uniform  |  |  |  |
| ortation: S   | School Bus  |  |   |  |  |  |
|   |   | X Cor  | ntracted Bus  | s 🗀  | Parent Cars  | Walk 🔲   |
| articipation, I<br>poration Sole<br>y CHILD/WA<br>DOL is found<br>juries sustain<br>at I have an<br>hat my CHIL<br>ment with a I  | agree to rein<br>) for all reaso<br>RD may bring<br>I not legally lia<br>ned by CHILD<br>understanding<br>D/WARD will<br>representative | mburse and phable legal g against the able by the D/WARD, thing of this agree be participate of the PAF  | indemnify the<br>and court fee<br>e PARISH/Se<br>courts and p<br>is paragraph<br>reement and<br>ating in. I furt  | e PARISH es incurred CHOOL wi revails in t will not ap any risks a her unders  | d by PARISH/SCHO which relates to the a the lawsuit. If the PA oply.  and hazards associ stand that I had the  | tood to include Bishop of DOL in defending a above named activity if ARISH/SCHOOL is four intention with the ACTIVITY opportunity to fully   |
| ırdian Signa  | iture   |  |   | Date   | <br>e  | <del></del>  |
| Home (  | )   |  | Work (  | )  |  |  |
|   |   |  |   |  |  |  |
|   | y CHILD/WA OOL is found juries sustain at I have an hat my CHIL ment with a agreement th  | y CHILD/WARD may brin OOL is found not legally li juries sustained by CHILD at I have an understandin hat my CHILD/WARD will ment with a representative agreement that I may have ardian Signature | y CHILD/WARD may bring against the OOL is found not legally liable by the juries sustained by CHILD/WARD, this at I have an understanding of this agreement with a representative of the PAF agreement that I may have had. | y CHILD/WARD may bring against the PARISH/SOOL is found not legally liable by the courts and p juries sustained by CHILD/WARD, this paragraph at I have an understanding of this agreement and hat my CHILD/WARD will be participating in. I furtisment with a representative of the PARISH/SCHOO agreement that I may have had. | y CHILD/WARD may bring against the PARISH/SCHOOL woll is found not legally liable by the courts and prevails in juries sustained by CHILD/WARD, this paragraph will not again at I have an understanding of this agreement and any risks that my CHILD/WARD will be participating in. I further understand with a representative of the PARISH/SCHOOL to clarical agreement that I may have had.  Ardian Signature  Date | y CHILD/WARD may bring against the PARISH/SCHOOL which relates to the a OOL is found not legally liable by the courts and prevails in the lawsuit. If the Paritires sustained by CHILD/WARD, this paragraph will not apply.  at I have an understanding of this agreement and any risks and hazards assoc hat my CHILD/WARD will be participating in. I further understand that I had the ement with a representative of the PARISH/SCHOOL to clarify any concerns or agreement that I may have had.  ardian Signature  Date |

## **EMERGENCY INFORMATION**

This information accompanies the teacher. Please be sure it is complete and accurate for this date.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child to a hospital for emergency medical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

| Name:  | Phone Number:  |
|--|--|
| Name:  | Phone Number:  |
| Please furnish medical information about your CHILD/\(\) identified ACTIVITY:  | WARD which may be pertinent to his/her participation in the above  |
| The information provided above is correct to the best of   | of my knowledge.   |
| Parent/Legal Guardian Signature  | Date   |
| Phone numbers: Home ( )  | _ Work ( )   |
|  |  |
| I CAN DRIVE AND HELP CHAPERONE:  If yes the following must be of Adult Hold Harmless/I Driver Information For VIRTUS certificate Acceptable Diocesan  Number of students with seat  I CAN HELP CHAPERONE ONLY:  If yes the following must be of the control of the co | Indemnity Agreement rm Transportation Policy  Screening report  Delts (no airbags) I can transport;  NO  The file in the School Office. Indemnity Agreement form |