

Student Activity Consent



Dear Parent or Legal Guardian,

Your son/daughter is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of employees of Saint John School. A brief description of the activity follows:

Name of Event: _____ Destination: _____

Designated Supervisor of Activity: _____

Date and Time of Departure: _____

Date and Anticipated Time of Return: _____

Method of Transportation: _____

Student Cost: _____

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability. As a 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 the school grounds and that my child will be under the supervision of the designated school employee/s on the stated dates. I further consent to the condition stated above regarding participation in this event, including the method of transportation.

Name of Student: _____ Grade Level: _____
(Please Print)

Name of Parent or Legal Guardian: _____
(Please Print)

Parent or Legal Guardian Signature: _____ Date: _____

Please return this form by: _____