

Saint Thomas Academy
Field Trip Parental Consent Form and Indemnity Agreement

Student Name _____

Destination: **Afton Alps**

Date: **February 7, 2012**

I, _____, grant permission for _____ to participate in the above named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify Saint Thomas Academy and the Archdiocese of St. Paul and Minneapolis from any claims or lawsuits brought against the school/Archdiocese of St. Paul and Minneapolis by myself, my child, or others, that arises out of any behavior by my child at the event or activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by the school and the Archdiocese in defense of such a claim/suit.

Parent/Guardian Name _____

Home Phone _____ Cell Phone _____ Work Phone _____

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

OPTIONAL MEDICAL INFORMATION:

Medications my child is taking at present _____

Allergies _____

Other Medical Conditions _____

Family Doctor _____ Phone Number _____

As Parent or Guardian, I agree to all of the above stated considerations and conditions

Parent/Guardian Signature _____ Date _____

The following are a few rules that all students are expected to follow while participating and representing Saint Thomas Academy.

I WILL:

- Treat all other persons with respect and not cause any intentional harm (physically, emotionally, or spiritually) to any person in any way.
- Respect the property of others, including all program facilities and property.
- Follow all appropriate instructions of all personnel aiding in this event, including, but not limited to chaperones, support staff, transportation personnel and administration.
- Be on time for all check-ins and departure time.
- Not have in my possession any tobacco, alcohol or any controlled illegal substance.

I agree that if any of these terms are violated, Saint Thomas Academy can send the participant home at the parent/guardian's expense.

Student Signature _____