



St. Alphonsus Catholic School Summer Camp Field Trip Permission Form

St. Alphonsus School Summer Camp plans many field trips throughout each week of the program. As a convenience, this permission slip will suffice for all planned activities during Summer Camp. By signing this permission slip, you are allowing your child(ren) to attend ALL trips scheduled.

1. In signing this form, I DO hereby give permission for my camper to leave SAS on all Summer Camp field trips. All campers will be under direct care of camp staff during field trips.
2. In signing this form, I DO hereby give permission for my camper to have sunscreen and insect repellent applied by a camp staff member if assistance is needed. SAS Summer Camp recommends a waterproof, long wearing formula no less than SPF30. For the insect repellent, it is recommended to avoid products that include DEET. (You may do your own research on DEET and sunscreen products.)
3. In signing this form, I ACKNOWLEDGE that Summer Camp is not responsible for any damage of an item brought to camp by my child.
4. In signing this form, I WILL, discuss with my child the appropriate behavior for Summer Camp. My child will abide by all rules and directions of the Summer Camp Staff. I acknowledge that my child may be removed from the trip for due cause including disruptive behavior, illness, use or possession of alcohol or controlled substances, a weapon, or dangerous instrument. The student will be returned to the custody of the parent/guardian who shall be responsible for all costs of this action.
5. In signing this form, I WILL notify in writing about how to communicate with an authorized person who may receive and act upon emergency messages concerning my child if I am unavailable.
6. In signing this form, I DO hereby consent and authorize SAS Summer Camp staff to take any and all action, including use of medical services and hospital facilities as they deem appropriate in the event that my child should become ill or otherwise injured under the care of the Summer Camp program.
7. In signing this form, I RELEASE SAS Summer Camp from all claims of injury, which may be sustained by my child while participating in any SAS Summer Camp sponsored activity, whether caused by negligence of the Summer Camp program or otherwise.
8. In signing this form, I RELEASE the agents, employees and representatives of SAS Summer Camp, from all claims, liability, and damages for personal injuries, property damage, or other loss arising from participation in Summer Camp field trips.
9. In signing this form, I AGREE, with the understanding that my child will be responsibly supervised, that I will not hold the SAS Summer Camp staff, St. Alphonsus School and its administration, nor any other chaperones responsible for events or situations beyond their control.

Camper's Name _____ Age _____
Camper's Name _____ Age _____
Camper's Name _____ Age _____

Parent's Name (printed) _____ Signature _____

Cell Phone _____ Work Phone _____