



Roman Catholic Diocese of Phoenix
OFF-CAMPUS PERMISSION FORM
 (attach Emergency Card - Appendix G.1)

Appendix G.2

Name of School _____

I, the Parent/Legal Guardian of _____ (the "Student") request that the School allow the Student to participate in the following off-campus activity:

Description of Activity: _____
 Date of Activity: _____
 Destination: _____
 Person in Charge: _____
 Estimated Departure & Return Times: _____
 Mode of Transportation: _____
 Educational Objective: _____

I give permission for the Student's participation in this activity. As Parent/Legal Guardian, I remain fully responsible for any legal responsibility resulting from any personal actions taken by the Student. I understand that the Student will be under the supervision of the designated school personnel and chaperones and that all school rules will be in effect.

In consideration for the Student's participation, on behalf of myself, the Student and our heirs, assigns, executors and personal representatives, I hereby release, absolve, indemnify and agree to hold harmless the School, the Roman Catholic Church of the Diocese of Phoenix (the "Diocese"), and any and all of their officers, directors, agents, employees, representatives, volunteers, sponsors or benefactors of said trip from any and all liability for any and all injury that may arise out of participation in this activity. I understand that such an undertaking involves an element of risk. I hereby expressly assume all risks and hazards incidental to participation in this activity.

I represent and certify that I, as parent/guardian of the Student, have read the entirety of this document and fully understand the contents, consequences and implications of signing this document and that I agree to be bound by this document.

 Signature Parent/Guardian

 Please Print Name

 Date

 Phone Number(s)