



PERMISSION FORM

Destination **Edwin Warner Park: Picnic Area #5**

Address **50 Vaughn Road / Nashville, TN**

Phone **479-422-6851 (Ashley George); 615-308-7722 (Heather Honeycutt)**

Date and Time Leaving **Arrive Wednesday, September 7 @ 7:45am**

Date and Time Returning **Depart Wednesday, September 7 @ 2:30pm**

How Student(s) will be Transported **Own Transportation**

Driven By **N/A**

Students Need to Bring **Tennis Shoes, Athletic Clothing, Sack Lunch, Water Bottle, Sunscreen, Bug Spray, Hat, Optional Blanket**

Cost **N/A** Please return signed form by **Monday, August 1**

Drop Off or Mail: 4210 Harding Road / Nashville, TN 37205; E-mail: honeycutth@stcecilia.edu; Fax: 783-0561

Please allow my daughter _____ to attend the trip on

(date) **September 7, 2011** to **Edwin Warner Park: Picnic Area #5**

Educational or Programmatic Purpose **Class Bonding/ Team Building**

In consideration of St. Cecilia Academy/The Dominican Campus taking my daughter on a field trip, I (we) as the Parent(s) or Guardian(s) of said minor, hereby waive all claims for damages and loss to any person or property which may be caused by any act or failure to act of St. Cecilia Academy/The Dominican Campus, its officers, agents, representatives, drivers or employees, and release them from any and all liabilities.

Signature of Parent/Guardian **Date**

Allergies and Other medical conditions: _____

Medications currently taking: _____

Insurance Co. Name _____

Policy and Group Numbers _____

Emergency Phone Number _____

If I (we) can not be reached in the event of an emergency, St. Cecilia Academy/The Dominican Campus, its officers, agents, representatives or employees are authorized to act in my (our) behalf, and I (we) agree to release them from any and all liabilities.

Signature of Parent/Guardian **Date**