GUARDIAN ANGELS

408 E. Walnut Street West Point, NE 68788 402-372-5328 FAX 402-372-5416

Website: www.gaccbluejays.org
Email: info@gaccbluejays.org

Date: 10-11-22



CENTRAL CATHOLIC

419 E. Decatur Street West Point, NE 68788 402-372-5326 FAX 402-372-5327

Website: www.gaccbluejays.org Email: info@gaccbluejays.org

Archdiocese of Omaha Parent Permission Form for Field Trip Participation

Dear Parent or Legal Guardian:		
Your son/daughter is eligible to participate in a parish spo from the parish grounds. This activity will take place under School. A brief description of the activity follows:		
Destination: St. Leo's Church and Parish Center, Sny	der, NE (Freshman Class Retreat)	
Designated supervisor of activity: Jen Kreikemeier, Car	npus Ministry, 402-380-2010	
Date and time of departure: Wednesday, October 19, 20	022 - 8:00am	
Date and anticipated time of return: Wednesday, October	er 19, 2022 – 3:30pm	
Method of transportation: Bus		
Student cost: \$0 Other Comments: Your child must bring their own lunc appropriate casual attire, we will be		ear school
If you would like your child to participate in this event, ple consent and release of liability. As parent or legal guardia which may result from personal actions taken by your children by your	n, you remain fully responsible for any l	_
We hereby consent to participation by our child, understand that this event will take place away from church the designated Diocesan/parish employee on the stated da participation in this event, including the method of transport	tes. We further consent to the conditions	described above. We der the supervision of stated above on
We do <u>not</u> give permission for our child,	, to take part in the above	described event.
	Parent's name/signature	Date
	Address	
	Emergency phone number	
Please return this form by: Monday, Oct 17th, 2022		