

September 19, 2011

Dear Parent(s),

The eighth grade will be taking 11 field trips this year. Due to liability issues the school must use buses. To avoid sending home 11 field trip forms and collecting money 10 times, we are combining all costs into 1 fee. The break down of the individual fees is listed below. Please send 1 check for the amount indicated by October 31, 2011. The permission form needs to be filled out and returned by Tuesday, September 20 since our first field trip is Tuesday, September 20. The activity director for Mercy Villa was on vacation for two weeks and just returned Thursday, September 16. The dates were confirmed Friday and the only dates available were next week. If there is a concern about the amount or date due for the fee please contact Mrs. Grennan.

$\$270 \times 11 \text{ field trips} = \$2900 \div 62 \text{ students} = \$47.90$  (\$270 for 2 buses)

7 field trips to the assisted living homes (Part of Literature curriculum)

2 field trips to Rose (Workshop for 8th grade play and to study a professional production)

1 field trip to Douglas County Courthouse (Trial re-enactment for *To Kill a Mockingbird*)

1 field trip to Omaha Community Playhouse (Purpose - to study a high school musical)

Rose Workshop Fee- \$7.50

Rose Production Fee - \$4.50

Courthouse Fee - \$0 (Students will need to bring money for lunch that day.)

Marian (Omaha Community Playhouse) Production Fee - \$3.00

Script for eighth grade Musical - \$6.50

Total for student = \$69.40

One permission slip is attached for all of the field trips and on the back is the field trip medication permission slip. All need to fill out the front side. Fill out the back side only if it applies to your child. Thank you.

Mrs. Grennan

Mrs. Coates

**ST. MARGARET MARY  
PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER  
FIELD TRIP PARTICIPATION**

Date September 19, 2011

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a school sponsored activity requiring transportation to a location away from the school grounds. This activity will take place under the guidance and supervision of employees of St. Margaret Mary Parish School. A brief description of the activity follows:

Destinations: Hickory Villa, Bickford Cottage, Mercy Villa - Assisted Living Facilities, Rose Theater - performance and workshop, Douglas County Courthouse , Marian High Performance at Omaha Community Playhouse

Designated supervisor(s) of activity: Mrs. Coates

Date and time of departure:

Assisted Living Facilities - 1:15 P. M. Rm 207 9/20, 10/18, 11/15, 12/13, 1/17, 4/17, 5/8: Rm 206 -9/21, 10/19, 11/16, 12/14, 1/18, 4/18, 5/9

Rose Theater performance - 12/15 12:30 P.M., Rose Theater workshop - 2/21 - 9 A.M., Douglas County courthouse 11/7 - 8:45 A.M.

Omaha Community Playhouse – Marian High Musical 10/27 – 9:10 A.M.

Date and anticipated time of return: 2:10 P.M. for Assisted Living Facilities; 2 P.M. Rose performance, 2:15 P.M. Rose workshop, 2:30 P.M. Douglas County courthouse; 10:45 A.M. for Marian High Performance

Method of transportation: Bus Student Cost: Total fee = \$69.40 ( due October 31 )

Participant's name: \_\_\_\_\_

Birth date: \_\_\_\_\_ Sex: \_\_\_\_\_

Parent/Guardian's name \_\_\_\_\_

Home address \_\_\_\_\_

Home phone: \_\_\_\_\_ Emergency phone: \_\_\_\_\_

Business phone: \_\_\_\_\_

I grant permission for my child \_\_\_\_\_ to participate in this event that will take place away from school grounds and that my child will be under the guidance and direction of parish employees and/or volunteers from the parish.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant").

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend St. Margaret Mary parish, its officers, directors, employees and agents, and the Archdiocese of Omaha, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Archdiocese of Omaha, its employees and agents and chaperons, or representative associated with the event for reasonable attorney's fees and expenses which they may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/diocese.

Signature \_\_\_\_\_

PLEASE RETURN THIS FORM BY: Tuesday, September 20, 2011