



PERMISSION FORM

I hereby give my child _____
(PRINTED NAME)

permission to be transported by **Project Insight Youth Camp** staff on a field trip from El Rocio Retreat on 2519 S. Inspiration Road in Mission to The Bridges Assisted Living Facility on Thursday June 26, 2014, and to Bentsen State Park on Friday, June 27, 2014. Both locations are in Mission.

I (Parent/Guardian) am responsible for transporting my child to El Rocio Retreat by 8:00 a.m. and picking him/her up at El Rocio Retreat by 4:00 p.m.

I UNDERSTAND THAT MY CHILD WILL BE SUPERVISED AT ALL TIMES. I WILL NOT HOLD **PROJECT INSIGHT YOUTH CAMP** OR THE STAFF LIABLE FOR ANY MISHAP OR ACCIDENT DURING EITHER FIELD TRIP.

SIGNATURE OF PARENT/GUARDIAN

DATE

PRINTED NAME OF PARENT/GUARDIAN

PHONE NUMBER WHERE YOU CAN BE REACHED DURING THESE EVENTS
