



# IMMACULATE CONCEPTION SCHOOL

## PERMISSION FOR SPECIAL ACTIVITIES

**DESCRIPTION OF ACTIVITY:**

Festival of Trees – School Choir performs

DATE: December 1, 2017 9:30 AM

DEPARTURE TIME: 9:00 AM

APPROX. ARRIVAL TIME BACK AT SCHOOL: 11:30 AM

METHOD OF TRANSPORTATION: Diversified Transportation

COST: (if any)

TEACHER'S SIGNATURE:

*[Handwritten signatures]*

ADMINISTRATION APPROVAL:

**PLEASE RETAIN THIS SECTION AS YOUR INFORMATION ON THIS ACTIVITY.**

**PLEASE SIGN AND RETURN BY**

**NOTE:** Please sign this form and return to the school as soon as possible if you would like your child to participate. If we haven't received written permission from the parents/guardians, the child **will not** be allowed to go.

I give permission for my child, \_\_\_\_\_, in Grade \_\_\_\_\_  
at Immaculate Conception School to participate in \_\_\_\_\_  
on \_\_\_\_\_.

\_\_\_\_ Yes, I can help with supervision on this activity and have a current Criminal Record Check on file.

Signature of Parent/Guardian \_\_\_\_\_ Date Signed \_\_\_\_\_