



Parent School Association Sponsored
**ALL-SCHOOL FIELD TRIP TO
RELLEKE FARM**

Holy Family students will have an All-School Field Trip on Monday, Oct. 15, 2018, to Relleke Farm in Pontoon Beach. Buses will leave school at 9:00 a.m. and arrive back at school about 1:00 p.m. Activities will include: a hay ride through a pumpkin patch, the straw pyramid slide, goat feeding, spider town, corn pit, jungle maze and face painting (weather permitting). Each student may paint a pumpkin or rock to take home. Each child will have a small pumpkin to take home.

Lunch will be served at Relleke Farm for \$3.00, which is to be submitted to the school prior to the trip (see attached form). Lunch will include a hot dog, chips, cookie, and water or a Capri Sun drink. You may send additional food for lunch with you child if you wish. Students may bring a cold lunch, but space is limited on the bus and students will not be allowed to return to the bus. Packed lunches will be placed on a picnic table until lunch time begins.

No child will be allowed to bring extra money to spend on the trip. Chaperones are not allowed to purchase food or items for students on the trip.

The field trip requires many parent volunteer chaperones, need based on grade level. Chaperones **must** ride the bus with the students and cannot take younger preschool children on the field trip. Chaperones cannot take their private cars. If we do not have enough parents, the trip will be canceled. To attend as a chaperone, adults must have a clear background check and must have completed a Protecting God's Children class.

If your child will eat the Relleke Farm lunch, please include exact change, \$3.00, in an envelope **MARKED** on the outside with your child's **name** and **grade**. If a chaperone would like to have lunch, please send an additional \$3.00 in your child's envelope and also include your name on the outside.

RETURN **BOTH** ATTACHED FORMS BY **SEPT. 21**

STUDENT NAME _____ GRADE _____

ALL MUST RETURN THIS FORM BY FRIDAY, SEPT. 21

STUDENT'S LUNCH AT PUMPKIN FARM

My child, (print) _____, in Grade, _____, would like to eat the lunch provided by Relleke Farm. I have enclosed (exact change) of \$3.00 for my child's meal in an envelope marked with my child's name and grade.

Please check:

_____ YES. My child wishes to eat the lunch served at Relleke Farm. I have enclosed \$3.00 in a marked envelope.

_____ NO. My child will bring a cold lunch.

I WISH TO BE A CHAPERONE

I, (print) _____, would like to be a Chaperone for Grade _____ or Grade _____.

My telephone numbers are: cell _____; home _____.

I have taken a Protecting God's Children Class.

CHAPERONE'S LUNCH AT PUMPKIN FARM

I, as chaperone, would like to eat the lunch provided by Relleke Farm on the field trip. I have enclosed (exact change) of \$3.00 for my meal in my child's envelope and have also included my name on the envelope along with my child's name and grade.

Please check:

_____ YES. I wish to eat the lunch served at Relleke Farm.

_____ NO. I am taking a cold lunch or not having lunch.

PLEASE DO NOT MIX MONEY FOR THE RELLEKE FARM LUNCH WITH THE MONEY FOR YOUR CHILD'S REGULAR SCHOOL LUNCHEs. THESE ARE SEPARATE FUNDS.

ALL MUST RETURN THIS FORM BY FRIDAY, SEPT. 21

DIOCESAN RELEASE / ALL-SCHOOL RELLEKE FIELD TRIP OCT. 15

We request that our child, _____, Grade, _____, be allowed to go on a field trip by bus with Holy Family School (hereafter the "Organization") children to Relleke Farm, 473 Sand Prairie Road, Pontoon Beach. Students will depart by bus about 9:00 a.m. from school and return about 1:00 p.m. in the afternoon on Monday, Oct. 15, 2018. Teachers and parent/volunteers will chaperone.

I/we request that my/our child be allowed to participate in this field trip because I/we believe that my/our child will benefit both educationally and spiritually. I/we understand that all rules of conduct and standards of behavior, as deemed by the Organization will apply to this activity and we have discussed these with my/our child. In consideration for making this agreement, I/we hereby release and save harmless the Organization and all its employees from any and all liability arising to my child as a result of this activity.

My/our child has been informed that he/she is to abide by the rules and regulations including the directions and instructions from the school's administrators, instructors, and supervisors as imposed on students while participating in this activity. This shall include his/her participation in any planning and information sessions and all the prerequisites prior to his/her participation in this activity. In the event that our child fails to abide by the rules and regulations imposed on the student while participating in this activity, disciplinary action may either require that he/she not participate in the activity.

I/we further understand that the Organization is not responsible for any damages or accidents that may result from our child's actions or the actions of others. To the greatest extent possible, we release the Organization and the Diocese of Springfield in Illinois, and all those acting on their behalf, from all liability for damages to or caused by our child as a result of this activity, and I/we agree to indemnify them for any such damages.

In the event of an emergency, we hereby grant permission to the adults supervising this activity, or any licensed hospital or physician, to authorize immediate emergency medical treatment for our child. Additionally we give permission to transport our child for emergency medical treatment. We wish to be advised prior to any further treatment by the hospital or doctor.

Emergency Contact / Medical Information: (Please Print)

Father/Guardian: _____ Daytime Phone: (____) _____
Mother/Guardian: _____ Daytime Phone: (____) _____
Address: _____ Home Phone: (____) _____
Other Contact Person: _____ Phone: (____) _____
Medical Insurance Company: _____
Company Address: _____ Policy Number: _____
Medical Conditions/Allergies: _____

We hereby also give our consent for our child to receive emergency medical care during this activity. We hereby also give our consent for photographs of our child to be taken and released.

Signature of parent/guardian: _____ Date: _____

Signature of parent/guardian: _____ Date: _____

Also print name of parent/guardian: _____