

# Mercy High School

## Parent Permission Form for Field Trip Participation

Dear Parent or Legal Guardian:

Your daughter is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school premises. This activity will take place under the guidance and supervision of employees from Mercy High School. The retreats will begin at 8:15 am after sign-in and will conclude the following day at 2:30 pm.

We reserve the right to not let students attend the retreat due to grades and absences. "In addition, the school reserves the right to prohibit a student from attending a retreat due to school rule violation(s) and/or inappropriate behavior." A brief description of the activity follows:

### Junior Overnight Retreat

**Colombiere Retreat Center in Clarkston, MI**

**Transported by: Mercy High School      Retreat Cost: \$90**

**Designated Supervisors: Mrs. Judi Griggs-Dennis & Mrs. Andrea Kowalyk**

**Please check the date of the retreat you plan on attending:    \_\_\_ October 4-5    \_\_\_ January 19-20**

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability. As parent or legal guardian you remain fully responsible for the actions and conduct of your child.

### Statement of Consent

I hereby consent to participation by my child in the event described above. I understand that this event will take place away from the school grounds and that my child will be under the supervision of the designated school employees on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

In consideration of my child being allowed to participate in this field trip, I agree to indemnify and hold harmless Mercy High School, any and all affiliated organizations, their employees, agents and representatives, including volunteer and other drivers, from any and all claims, including negligence, arising from or relating to my child's participation in this field trip. This indemnification and hold harmless agreement does not apply to claims for intentional misconduct or gross negligence.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian of \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Evening Phone # \_\_\_\_\_ Cell Phone \_\_\_\_\_

email address \_\_\_\_\_

\_\_\_\_ Yes, I would like to donate to the Retreat Scholarship Fund in the amount of \$ \_\_\_\_\_  
(any amount is appreciated. Please add this amount to your payment. Thank you for your donation and you will receive a receipt of your donation from the Advancement office).

**Please return this form to the Pastoral Team Room by ASAP – FIRST COME FIRST SERVE  
TURN OVER AND COMPLETE THE BACK**

Dear parents and students,

All of the rules regarding drug and alcohol use that are stated in your student handbook will apply while on this retreat. In addition to the sanctions that Mercy High School places on those found violating these rules, during the retreat, **ANY STUDENT FOUND POSSESSING OR USING CIGARETTES, DRUGS, OR ALCOHOL WILL BE ASKED TO LEAVE THE RETREAT IMMEDIATELY.** Parents will be called to come and pick their daughter up. Colombiere Retreat Center is a smoke free and alcohol free facility.

Part of what makes a retreat successful is taking a step back and removing ourselves from the little things of our everyday lives. In order to help accomplish this, we ask that the students not make any phone calls during the retreat. If your daughter has a cell phone, please make sure she leaves it at home. In the case of an emergency we will make sure she has access to a phone and you may reach us at Colombiere Retreat Center at, (248) 620-2534 a 24 hour line for emergencies.

It is important to adhere to the guidelines and cooperate fully with the Staff Leaders on Retreat. Outside of the general rules covered in the handbook the following also apply. No food is consumed in the sleeping rooms; all girls must remain in the sleeping rooms assigned unless given permission by one of the Pastoral Ministers to change rooms. When it is curfew time everyone must be in her assigned room with lights off and quiet. No one is to be out of the room after this time unless there is an emergency and a pastoral minister must be contacted regarding the nature of the emergency.

For a successful experience all retreatants need to remain open to the experiences on the retreat. This includes, but is not limited to, silent time, prayer, small and large group discussions, art expression time and quiet personal journaling time. You agree to participate to the best of your ability and maintain an atmosphere of respect for each other and the process at all times on the retreat.

**I (print STUDENT's name) \_\_\_\_\_ understand that the rules stated above apply to me while I am on the Junior Overnight Retreat and that I will be asked to leave the retreat if I violate any of these rules.**

**Signature of student** \_\_\_\_\_

Allergies/Dietary Needs: \_\_\_\_\_ Gluten Free \_\_\_\_\_ Vegetarian Other \_\_\_\_\_

**I (print PARENT's name) \_\_\_\_\_ understand that the rules stated above apply to my daughter while she is on the Junior Overnight Retreat. You will be able to reach me at the following numbers during the retreat.**

**Signature of parent** \_\_\_\_\_

Day time phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Evening phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Cell phone ( ) \_\_\_\_\_ email address \_\_\_\_\_

**\*\*\* If you are going to be out of town or unreachable, please indicate below** someone who is aware of the above rules and should be contacted in case of emergency.

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Day phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Evening phone ( ) \_\_\_\_\_ - \_\_\_\_\_

**This form must be signed and returned to Mrs. Griggs-Dennis by ASAP**