



Permission Slip

**COVENANT HOUSE SLEEP OUT
Friday April 27, 2018**

As parents/guardians of _____, we hereby grant permission to have him/her attend the St. Mary of the Lakes Church and School Covenant House Sleep Out for Poverty Event on Friday April 27, 2018. The event will take place in the Gymnasium and on the grounds of the school campus located at 196 Rt. 70, Medford, NJ. I agree that, in consideration of our child being permitted to attend said event, we each will hold harmless and indemnify the church, ministry leaders, the Diocese of Trenton and their agents and employees, and Covenant House agents and employees, against any and all claims for injury to our child involving said event.

We understand that:

The students will not be permitted to leave the event held at St. Mary of the Lakes School, unless a parent./guardian signs them out. Parents and/or designated guardians must sign students in at the start of the event and sign them out when they leave the event. Medford Township Police will be patrolling the grounds throughout the event and barricades will be set up, restricting traffic onto the property between 11:15 pm-7:00 am. **Students will be chaperoned throughout the event by the Parish Youth Minister, Linda Xerri and other adult members of our parish/school. Linda's cell phone is 609-553-1954. This event is for students in grades 6-12 only!**

Date

Parent's Signature

Emergency Cell: _____

Printed Name

ALLERGIES/MEDICAL CONCERNS: _____
MEDICATIONS: _____