IDENTE YOUTH HEMPSTEAD

516-489-3675 Our Lady of Loretto Parish 104 Greenwich Street

Hempstead, NY 11550

Ice Skating Trip - Newbridge Arena

Idente Youth is organizing an Ice Skating trip to <u>Newbridge Arena - 2600 Newbridge Road</u>, <u>Bellmore</u>, <u>NY 11710</u> on <u>Saturday</u>, <u>February 20th</u>, <u>2016</u>. We will leave at <u>11:00am</u> from Our Lady of Loretto Parish and we will return around <u>3:30pm</u>. The cost of the trip is <u>\$13 (Adults)</u> [\$9(Admission) + \$4(Skate rental)]. An additional <u>\$5.50</u> if you are taking public transport.

(Please detach and return)

PARENTAL PERMISSION FORM

I hereby give my son/daughter permission to take part in the Ice Skating Trip to Newbridge Arena - 2600 Newbridge Road, Bellmore, NY 11710 on Saturday, February 20th, 2016. The event is organized by Idente Youth and Our Lady of Loretto Parish. I understand that the group will depart at 11:00am from Our Lady of Loretto Parish and will return to the parish around 3:30pm. I understand that I have to <u>drop my child PROMPTLY at 11:00am (at Church)</u> or 12:15pm (at Rink) and <u>pick up my child PROMPTLY at 2:30pm (at Rink)</u> or 3:30pm (at Church), unless I have checked below that the child can return home on his/her own. The youth will travel along with the youth group via public transport.

I understand that the trip will have adult supervision, and reasonable and appropriate measures will be taken to minimize risk or injury. In case of an emergency, he/she may be treated by a doctor. Should medical attention be required for my child, I will pay the expenses incurred. In case of accident, injury or loss, my family and I will not hold Our Lady of Loretto Parish, Idente Missionaries, Idente Youth, Diocese of Rockville Centre or any affiliate/agent liable.

I consent that any pictures/video taken of my child in connection with this event can be used for publicity, promotion or television showing now or in the future, and I waive compensation in regard thereto.

Child's Name	Date of Birth	
Parent/Guardian Name	Mobile Number	Telephone number
Parent/Guardian Signature		Date
Address		City, State, Zip
Child's e-mail	Parent's e	-mail
☐ My child will be picked t	up from the point of departure	
☐ My child can walk home of	on his/her own (Parent's signa	ture)