

MOUNT CARMEL ACADEMY OUT-OF-SCHOOL ACTIVITY PERMISSION FORM

Please complete this form and give it to the Finance Office Assistant to give to the President for approval at least one week in advance of the activity. After receiving approval, submit the completed form to the Drivers ed instructor(s), Athletic Director, to the Dean of Student Activities for clubs and extracurricular activities, or to the Finance Office Assistant for academic events. Forms are in the shared directory on the network or webpage..

Group or Club Name: Driver's Education Testing requirement for licensing

Type of Activity: Drivers education road skills test

Location: State approved road skills route from Mount Carmel Academy

Date of Activity: Test Date _____

Departure Time: Approx.- _____

Return Time: Approx. -20 minutes from start time

Teacher(s) in Charge of Activity: Ms. Bean, Mrs. Tilly, Christopher Kelley, Erin Morere, Chad Olivard, Jamie Thomatis, Matthew Leake

Number of Students Participating: Describe the Educational Purpose of this Activity: Students will experience a real world life skill situation as they take the Louisiana Road skill licensing test.

Date: _____ President/Vice-President's Signature: _____

THIS SECTION TO BE COMPLETED BY A PARENT OR LEGAL GUARDIAN

I, _____, the parent/guardian of _____, request that Mount Carmel Academy allow my child/ward to participate in the activity described above.

TERMS & CONDITIONS OF PARTICIPATION:

Violations of civil law, use of alcohol or drugs, and other serious infractions of Mount Carmel Academy's rules may result in my child/ward being dismissed from this activity. In the event of dismissal, I agree that it is my responsibility to arrange for my child's/ward's transportation home and to assume all costs related to her travel.

MODE OF TRANSPORTATION: (All Drivers must submit Use of Personal Vehicle Form, Drivers License, and Insurance Card.)

- ☐ My daughter will provide her own transportation. (Passengers allowed: *proof of insurance required*)
- ☐ My daughter will provide her own transportation. (No passengers allowed)
- ☐ My daughter will ride with me, the undersigned.
- ☐ My daughter will ride with _____ another student or parent, to and from this event.
- ☒ Other **Drivers Education Licence Testing**

RELINQUISHMENT OF CLAIMS: To the fullest extent allowed by law, I/We recognize and acknowledge that there are risks in my child's/ward's presence and participation in the school sponsored program. I agree to indemnify, hold harmless, waive and relinquish any and all claims I may have against the Mount Carmel Academy and its officers, agents, employees, representatives or volunteers (heretofore, School) arising out of, in connection with the transportation to and/or from the event, or any activity my child/ward participates in while attending the school sponsored program, except for claims arising out of the sole or gross negligence and willful and wanton misconduct of the School its employees and representatives.

MEDICAL RELEASE: Our permission is hereby given to the school representative of School to authorize, by his/her signature, whatever medical or surgical treatment may be considered necessary or advisable by the physician or nurse in attendance in the event of an accident or medical emergency involving:

STUDENT'S NAME: _____ Date: _____

PARENT/GUARDIAN(name Typed or Printed) _____ Contact telephone no. _____

DATE: _____ Parent/Guardian Signature _____
(Parent or Guardian)

(Attached is a copy of my child/ward's current health benefit medical card. Failure to attach acknowledges that Mount Carmel Academy is not responsible for delay or denial of care when presenting to a health care provider or facility for treatment.)

Company Name and type of Plan: _____

Individual to contact in case of emergency: _____

FAMILY PHYSICIAN: _____ (Name) _____ (Telephone)
PHONE: _____ CITY: _____

ALLERGIES, REACTIONS OR OTHER COMMENTS: _____

ATTENTION: STUDENTS THAT FAIL TO SUBMIT THIS FORM BY THE REQUIRED DATE AND THOSE WHO SUBMIT A FORM THAT IS NOT COMPLETED IN ITS ENTIRETY WILL NOT BE ALLOWED TO PARTICIPATE IN THIS ACTIVITY.

Last Updated 08.10.2011