

Serving the needy souls
of the world while we
increase empathy and
decrease apathy in our
student members
training to become
servant-leaders

Serving Other Souls, Inc.

1620 Harvest Hill Drive

Pittsburgh, PA 15239

Web: www.servingothersouls.org

Email: servingothersouls@gmail.com

Phone: 412-496-8994

501(c)3 Non-Profit Organization EIN #:45-3541551



FIELD TRIP PARTICIPATION FORM & PARENT PERMISSION AND RELEASE

Your son/daughter is eligible to participate in a school-sponsored activity requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of employees from Serving Other Souls. A brief description of the activity follows:

Name of Event: Serving Other Souls' Annual Christmas Caroling for Senior Citizens

Destination: Murrysville Rehab and Wellness Center
(Formerly Murrysville Golden Living Senior Center)
3300 Logans Ferry Road, Murrysville, PA 15668
(Member must have transport/pick up to address)

Designated Supervisor of Activity: Mr. Cooley, Sponsor of S.O.S.

Date and Time of Departure: Weeknight TBA before Christmas, drop off at 5:30 PM (this year Thursday, Dec 21st, 2017)

Date and Anticipated Time of Return: Weeknight TBA before Christmas, pick up at 7 PM
(This year, Thursday, Dec 21st, 2017)

Method of Transportation Parent drop off at event

Student Cost: Free (S.O.S. dues already collected will pay for bus for S.O.S. members and family)

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 any legal responsibility, which may result from any personal actions taken by the named student.

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 Serving Other Souls member 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 the agreement of Serving Other Souls (S.O.S.) to allow my child to participate in the above described outing, and intending to be legally bound hereby, I agree to indemnify and hold harmless the following organizations and individuals that include Serving Other Souls, Inc., their employees, agents, successors, assigns and legal representatives, against any loss from any and all claims, demands and actions at law or in equity that may hereafter at any time be brought by my child, or anyone acting on her or his behalf, for the purpose of enforcing a claim for damages because of any injury to my child or any cause of action of any kind or nature as a result of or in any way related to his/her participation in the above-mentioned outing, or his or her transit thereto.

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I/We agree that in the case of injury to my/our child, I will apply our hospitalization and/or accident insurance toward the payment of the expenses incurred and will not look to **Serving Other Souls** or any of their officers, employees, agents, successors or assigns for the payment of any medical costs or injury related costs.

IN WITNESS WHEREOF, I/We executive this HOLD HARMLESS AND INDEMNIFICATION AGREEMENT this:

_____ day of _____, 20____

Parent/Guardian Signature

Parent/Guardian Signature

Student Acceptance of Responsibility

I understand that my participation in this field trip requires me to check with my teachers in advance for assignments. I will promptly make up any class work missed.

Student Signature