 Little Brother to Brother Mentoring Program

Parental / Guardian Permission Form

NOTE: Please fill out and return. Your child will not be allowed to attend this event without returning this completed form.

**Your child will Statue of Liberty & Ellis Island Visit, Liberty State Park, Jersey City, NJ   
be attending:**

**Date(s): Sunday, May 5, 2019**

**Time: Arrive Charles Bullock School Parking Lot at 8:30 AM / Returning to School around 5:00 PM**

**Location: Leaving from Montclair at 10:00 AM. Breakfast served at 8:30 AM**

**Cost: FREE. Please bring money for snacks.**

**Transportation: Bus to Liberty Park**

**Note(s):** Please check the online **‘Events Calendar’** at <http://teenmentoring.org> for event details.

Please return **To Joe Davis, Program Director or an authorized Little Brother to Brother**  
this form: **representative at the School, no later than TUESDAY, April 30, 2019.**   
  
 **(Please Print)**  
  
This is to certify that I give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to attend the field trip noted above.

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:  
  
 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*I understand that the Montclair school authorities will take responsible precautions against accident, personal injury and loss of, or damage to, properly while going to, from, and at the site of the trip, but that Brother to Brother does not assume any legal liability for any such occurrence. I/we the parent(s)/ guardian(s) of the above named student do hereby give my approval to his participation in any and all activities associated with the Brother to Brother program. My/our child is in good physical condition and has no illness or other condition that would preclude his participation in this activity. I/we do assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities; and do further hereby release, absolve, indemnify and hold harmless the Brother to Brother Mentoring Program; and the Montclair Board of Education; and any or all their affiliates.*