



# Parent Authorization Form

Please print all information and sign in the designated space. Thank you.

## Transportation Release:

I/we, \_\_\_\_\_ hereby authorize and give permission to all volunteers and staff members of St. Ignatius College Preparatory School, to transport my child/children 1) \_\_\_\_\_ 2) \_\_\_\_\_ to all school/staff/volunteer authorized field trips and Venturing activities, for the academic year, from August 20\_\_ through May 30, 20\_\_.

## Medication Release:

I/we, \_\_\_\_\_ hereby authorize and give permission to all volunteers and staff members of St. Ignatius College Preparatory School, administer (list approved over the counter drugs) \_\_\_\_\_ to my child/children:

1) \_\_\_\_\_ 2) \_\_\_\_\_  
for all school/staff/volunteer authorized field trips and Venturing activities, for the academic year, from August 20\_\_ through May 31, 20\_\_.

## Photography and Audio/Visual Release:

I/we, \_\_\_\_\_ hereby authorize and give permission to all volunteers and staff members of St. Ignatius College Preparatory School, to display art and class work of, to photograph, film and record the voice of my child/children

1) \_\_\_\_\_ 2) \_\_\_\_\_ during all school/staff/volunteer authorized field trips, school day activities and Venturing activities, and to use these images in all audio or visual mediums, for advertising or recruiting for the school, Venturing Crew 304, and for the Boy Scouts of America. All photographs, audio and visual images of my child/ren taken during school activities, school field trips, or Venturing activities will remain the sole property of St. Ignatius College Preparatory School.

## Medical Release:

I/we, \_\_\_\_\_ hereby authorize and give permission to all volunteers and staff members of St. Ignatius College Preparatory School, to administer First Aid and to authorize trained medical personnel to administer any and all medical procedures deemed necessary in the case of an emergency to my child/children 1) \_\_\_\_\_ 2) \_\_\_\_\_ during school activities, all school/ staff/volunteer authorized field trips and Venturing activities, for the academic year, from August 20\_\_ through May 31, 20\_\_.

By signing below, I/We hereby agree to hold harmless and without recourse to suit all staff and volunteers of St. Ignatius College Preparatory and Venturing and the Boy Scouts of America for any and all injury whether to persons or property, real or imagined, in my household, those visiting the school and grounds with me/us for any occasion or for any other reason. I/We further agree that participation in St. Ignatius College Preparatory School is a privilege I/we am/are freely choosing for my/our child/ren.

\_\_\_\_\_  
\_\_\_\_\_  
Parent(s) or Guardian Signatures

1) \_\_\_\_\_  
2) \_\_\_\_\_  
Children Signature(s)

\_\_\_\_\_  
\_\_\_\_\_  
Date