

Greek Orthodox Metropolis of Boston Vacation Church School VCS 2011 August 1 - August 5

Trip Release Form:

I, _____, do hereby give permission for
(Parent or Guardian)

_____ to attend the Vacation Church School field trip to
(Name of camper (s))

the Metropolis of Boston Camp and Retreat Center in Contoocook, NH on **Friday, August 5, 2011**. The bus will depart from the Arlington Greek Orthodox Church at **8:30 AM** and will return by **4:00 PM**. Lunch will be provided by the Metropolis of Boston Camp. Please note that in providing a field trip, the Metropolis does not hold itself responsible in any way for any injury that might arise from participation in such an event. Participation is strictly voluntary and carries with it the commonly held understanding that some degree of risk is associated with the activity. Accordingly, participants are notified that if they are injured as a result of the field trip their assumption of the risk will relieve the Metropolis of any legal duty towards him or her. In signing this release form, I hereby give the VCS Director full authority, as temporary guardian, to act on my behalf regarding my child/children. I understand that in case of an emergency, the VCS Director and/or designated staff will try to contact me, but until such time, they will make all necessary decisions to ensure the safety and well-being of my child/children. I also give permission for my child/children to participate in all program activities, both on, as well as, off the camp site during the field trip to the Metropolis of Boston Camp, unless I specify otherwise.

Signature of Parent/Guardian

Date