



PARENT/LEGAL GUARDIAN PERMISSION SLIP AND INDEMNITY AGREEMENT

MUST BE RETURNED PRIOR TO JULY 13, 2025

TO BE COMPLETED BY THE SCHOOL

Name of Child/Ward: _____

Parish/School: St. Elizabeth Ann Seton Catholic School

Designated Supervisor of Activity: BUS RIDER 2025-26

Routes (please circle one): **St. Michael** | **St. Andrew** | **Our Lady Star of the Sea (Holy Trinity)**

Activity: Bus rider to and from school daily 2025-26 School Year

Description of Activity: Daily rides to and from school

Date(s) of Activity: August 1, 2025 – May 30, 2024

Leave time from Holy Trinity school: 7:35 am (pick up then drive to Seton)

Arrive at Holy Trinity approximately 3:45 pm

Leave time from St. Michael school: 7:25 am - Then arrive at St. Andrew's at 7:45 am

Arrive at St. Andrew's at approximately 3:30 pm; then at St. Michael's at approximately 4:00 pm

Activity Fee: \$500 (non-refundable)

Uniform/Clothing: Uniform Policies enforced

NOTE: Riding the Seton Catholic bus is a privilege that can be revoked due to inappropriate behavior.

Reserving a place on the Seton Catholic bus is done on a first-come, first-served basis. Slots fill up fast.

I consent to the participation of my CHILD/WARD in the above named ACTIVITY. In consideration for my CHILD/WARD's participation, I agree to reimburse and indemnify the PARISH/SCHOOL (understood to include Bishop of Charleston A Corporation Sole) for all reasonable legal and court fees incurred by PARISH/SCHOOL in defending a lawsuit that I or my CHILD/WARD may bring against the PARISH/SCHOOL which relates to the above named activity if the PARISH/SCHOOL is found not legally liable by the courts and prevails in the lawsuit. If the PARISH/SCHOOL is found legally liable for injuries sustained by CHILD/WARD, this paragraph will not apply.

I certify that I have an understanding of this agreement and any risks and hazards associated with the ACTIVITY described above that my CHILD/WARD will be participating in. I further understand that I had the opportunity to fully discuss this agreement with a representative of the PARISH/SCHOOL to clarify any concerns or questions about the ACTIVITY or this agreement that I may have had.

Parent/Legal Guardian Signature

Date

Phone numbers: Home () _____
Address:

Work () _____