**LAGRANGE YOUTH COUNCIL**

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**TRIP PERMISSION FORM**

## Trip to Auburn Escape Zones Tuesday, 12/ 15/ 20

Dear Parent(s) or Guardian(s),

This is to inform you that the LaGrange Youth Council is going on a field trip to the Auburn Escape Zones in Auburn on Tuesday, December 15th. Kindly check the information provided and fill out the form below:

## Field Trip Information: Things to Remember:

Date: Tuesday, December 15th, 6pm – 10pm

Place: Auburn Escape Zones

Purpose: Teambuilding

Cost: None

Itinerary: We will leave City Hall at 6pm and return by 10pm depending on traffic

Please remember to dress appropriately. Escape Rooms are casual attire. So make sure to be comfortable.

We will provide transportation and dinner.

No spending necessary.

**Name of Supervisor: Adam Speas, City of LaGrange LYC Advisory (323-868-2832)**

**Katie Van Schoor, City of LaGrange LYC Advisor, & Meg Kelsey, City Manager & LYC Advisor, Bill Bulloch, City Asst. Manager & LYC Advisor, & Jeremy Andrews & Emma Strickland, City of LaGrange LYC Advisors will also be in attendance.**

**This trip is going to take from 6pm to 10pm, depending on traffic and other circumstances. All students are to arrive at City Hall, 200 Ridley Avenue at 5:45pm. We plan to return by 10pm. We will be riding in a City of LaGrange passenger van driven by a city employee.**

## I permit my child \_\_ \_ to attend the trip. supervised by the City of LaGrange

Please be reminded that the meet up time is 5:45pm in front of City Hall, 200 Ridley Avenue. We will leave at 6pm.

ACCIDENT WAIVER & RELEASE OF LIABILITY

Should any illness or accident occur on the trip, I will not hold the LaGange Youth Council advisors liable and I authorize the leader to obtain the services of a medical doctor if necessary.

In case of emergency, I give permission for my child to receive medical assistance. Please contact:

Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City of LaGrange 200 Ridley Avenue LaGrange GA 30240