

Petroleum Valley Youth Center

Permission Slip

Camper's Name: _____

Trip: **Belmont Pool**

On: **Friday, July 7th**

I, on behalf of myself and on behalf of the above-named student do hereby release and discharge the Petroleum Valley Youth Center and its employees, from any and all rights, claims, and or actions which I and the above-named student may hereafter have against Petroleum Valley Youth Center and its employees arising out of the aforementioned field trip.

I understand that in case of a medical emergency, every reasonable attempt will be made to contact the parent/guardian of the above-named student. If, however, I cannot be contacted and a medical emergency arises, I, by affixing my signatures to this form, give permission for my child to receive all necessary emergency medical care.

Parent/Guardian Signature: _____ Date: _____

Emergency Contact Name 1: _____

Phone: _____

Emergency Contact Name 2: _____

Phone: _____

Please list any serious medical problems and/or allergies: _____

Staff Usage Only: ☐ Cash ☐ Check #: _____ Amount: _____ Date Paid: _____

Trip: Belmont Pool

Date: Friday, July 7th

Drop Off: 12:00 am

At: Belmont

Pick Up: 3:00 pm

At: Belmont

Cost: \$10 (Cash or please make checks to PVYC)

Join PVYC as we head to the **Belmont Pool in Kittanning (415 Butler Rd. Kittanning, PA)**. Campers will meet at the front gate of the Belmont Pool at 12:00 p.m. We will be providing pizza, chips and drinks to the campers. Pickup will be at 3:00 p.m. at the front gate.

PERMISSION SLIPS AND PAYMENTS MUST BE PUT IN AN ENVELOPE MARKED WITH YOUR CAMPERS NAME

PERMISSION SLIPS ARE DUE FRIDAY, JULY 7TH AT THE POOL.