



Field trip to the Pittsburgh Zoo & PPG Aquarium

This field trip is for children ages 9-17

Field Trip Details

Location Pittsburgh Zoo & PPG Aquarium
7340 Butler Street
Pittsburgh, PA 15206

Date August 15, 2009

Time Depart: 8:30
Arrive: 1:30

Transportation Children's Hospital Shuttle

Notes There will be adult chaperones in attendance from Child Life and a doctor.
* Attendance is contingent upon completing a release form with Children's Hospital in addition to the permission slip.

For more information about The Pittsburgh Zoo & PPG Aquarium, please visit their web site at: www.pittsburghzoo.org



Cut off bottom portion of permission slip and return to ABC by 8/7/2009. Fax (734) 243-9912 email: admin@bladderextrophy.com

Emergency Information

In case of emergency, please contact:

Name/Relationship	Phone
<i>Special Instructions:</i>	

I give permission for my child, _____ to attend the field trip to Pittsburgh Zoo & PPG Aquarium on August 15, 2009

X _____
Parent or guardian signature **Date**



FIELD TRIP RELEASE

I/We specifically consent to _____'s participation in following field trips:

[August 15, 2009, Pittsburgh Zoo & PPG Aquarium,]

The undersigned parent, legal guardian, or participant acknowledges that even though every effort is made to promote a safe, accident-free environment, incidences may occur.

In consideration for being accepted to attend the aforementioned field trip(s), being sponsored by Children's Hospital of Pittsburgh of UPMC, we (I), being 21 years of age or older, do for ourselves (myself) and for and on behalf of my child-participant, if said child is not 21 years of age or older, hereby release, forever discharge and agree to hold harmless Children's Hospital of Pittsburgh of UPMC, it's directors, officers, employees, affiliates, volunteers, and agents from any and all liability, claims, or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in this field trip.

Furthermore, we/I and on behalf of our (my) child-participant if under the age of 21 years hereby assume all risk of personal injury, sickness, death, damage and expenses as a result of participation in any activities involved therein.

Further, authorization and permission is hereby given to Children's Hospital of Pittsburgh of UPMC as the field trip sponsor to furnish food for this participant. I/we understand we are responsible for ensuring that my/our child has with him/her all necessary medications and we will provide a list to Children's Hospital of Pittsburgh Staff. We further will advise Children's Hospital of Pittsburgh of any food allergies that my/our child-participant may have.

The undersigned further agrees to hold harmless and indemnify Children's Hospital of Pittsburgh, its directors, officers, employees, affiliates, volunteers, and agents, for any liability sustained by as the result of the negligent, willful, or intentional acts of said participant.

This liability extends to participants/parent/legal guardian's heirs, successor, and/or estate.

Participants, if 18 years of age or older, must sign this document. If participant is under 18, both parents must sign unless parents are separated or divorced, in which case the custodial parent must sign.

Parent/Legal Guardian or Participant

Date

Parent/Legal Guardian

Date