



**City of Chandler, Recreation Division L.I.T. Program
Off Site Trip Permission Slip**

Site: _____
Code: _____

As a participant in the City of Chandler’s Leaders In Training Program, your child has been assigned to the City of Chandler’s Communications & Public Affairs Division. On this assignment your child may travel in a city vehicle to

The following is a list of the trip details:

Address trip location: _____

Estimated Time & site of departure: _____

Estimated Time & site of return: _____

To be a valid permission slip for these trips please complete the following information and return to your child’s mentor by

Please keep this top portion of the slip for your information.



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PLEASE COMPLETE ALL BLANKS IN CLEAR LEGIBLE PRINT!

I give permission for my child _____ to travel in a City of Chandler vehicle during the duration of his/her assignment in the L.I.T. Program.

I understand that in case of emergency, every effort will be made to reach me. I do, however, give my permission for my child to receive medical treatment in case of an emergency. **I understand that the City of Chandler does not carry accident insurance for these programs. I agree to indemnify and hold harmless the City of Chandler from all losses or injuries sustained during my participation. I also give my permission for any photo/video taken of participants to be used by the City of Chandler.** I understand my signature grants my permission for my child’s attendance.

School: _____ Grade: _____ Child’s Date of Birth: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian Name (please print): _____

Parent/Guardian Phone Number(s): _____

Signed (parent or guardian only): _____

Emergency Contact: _____ Phone Number: _____

No.: _____

Site:
Code: _____