



2024 Coalition Outing Permission Slip

As parent/legal guardian of _____, I grant
(Print Student's Name)

permission for him/her to participate in the field trip described below and give photo consent for my child's photo to be used for any marketing purposes.

Wintrust Arena 200 E. Cermak Rd,
Chicago, IL 60616

Purpose of the trip:

2024 - 8th Grade & High School Youth Outing

Departure Location:

Patricia A. Jones Center (PAJC)
414 S. Lewis Ave., Waukegan, IL 60085

T-shirt size: _____

Schedule:

WNBA Basketball Game
Chicago Sky vs Las Vegas Aces

8:00 am: student check-in
9:00 am: bus departure
9:00 - 10:00 am: travel to Wintrust Arena
10:00 - 10:45 am: bus parking and arrival
11:00 - 12:30 pm: game time (approximate)
12:30 - 1:30 pm: board bus & departure from Chicago

Sunday, August 25, 2024

FREE Outing Trip

All students are required to be at the Patricia A. Jones Center (PAJC) by 8:00 am. Parents are **required** to be waiting for the bus return upon arrival from Chicago (1:30 pm or sooner pending traffic). Each parent will be contacted via text as the bus draws closer to the PAJC.

Parent emergency contact information:

Name: _____ Cell #: _____
(please print)

Address: _____ Secondary Cell #: _____

Name of School: _____ Grade: _____

Signature of Parent

Signature of Student

Date

I acknowledge that I am the parent or legal guardian of the student reference above and give permission for my child to attend the 2024 Youth Outing presented by Waukegan Township, Coalition to Reduce Recidivism, and Partnering Agencies. I understand that in the event my child does not exhibit the expected behavior, I will be contacted and depending on the severity of his/her fractions, I will be responsible for securing transportation returning them home.

