



Student Name: _____ Student Cell #: _____

Jesuit High School Out-of-School Activity

Name or Type of Activity: **Spirit Bus for Soccer State Championship Game**

Location: **Strawberry Stadium, Ned McGehee Dr, Hammond, LA 70401**

Emergency Telephone Number at Site: **504-483-3946**

Departure Date / Time (from Jesuit): **Saturday, 2/28/26** **5:30pm**

Return Date / Time: **Saturday, 2/28/26** **11:30pm**

Teacher in Charge of Activity: **Roger Bacon (Chaperone); Matt Orillion (Student Activities Director)**

Number of Students Participating: **40** Mode of Travel: **Jesuit School Bus**

Organization Sponsoring Trip: **Soccer Team; Student Activities Office**

I/We, the parents/guardians of (PRINT STUDENT NAME) _____, request that Jesuit High School allow my/our son to participate in the activity described. In consideration of my/our son's participation in this event and the benefits to him that are anticipated from such participation, I/we hereby release and agree to defend, indemnify and hold harmless Jesuit High School, its employees, agents, and volunteers from any and all liability, damages, losses, costs or expenses, including attorney's fees, arising from injuries to or death of my/our son arising from the negligent and/or intentional acts and/or omissions of our son or third parties but excluding any such liability, damages, losses, costs or expenses arising from the negligent and/or intentional acts or omissions of Jesuit High School, its employees or agents. Furthermore, I/we understand and agree that any violations of civil law, use of alcohol or drugs, and other infractions of Jesuit High School's policies and/or rules as set forth in its school Bulletin may result in my/our son's being dismissed from this activity. In the event of dismissal, I/we agree that it is my/our responsibility to arrange for my/our son's transportation home and to assume all costs related to his travel. In cases of illness or injury, I/we authorize Jesuit High School or its representatives to seek medical attention for my/our son. I/We understand that volunteers may be attending this event and assisting in the supervision of my/our son.

I/We have read, understand, and agree with, the above statements.

Date _____ Signature _____

Emergency Phone Number: _____

Insurance Company Name: _____ Policy Number: _____

Please list any pertinent medical information: _____

THIS FORM IS YOUR TICKET TO RIDE THE BUS. YOU MUST RETURN THIS FORM TO STUDENT ACTIVITIES OFFICE, ROOM 132, BY FRIDAY 2/27/26.

Spirit Bus to State Championship Soccer Match
Jesuit vs. Brother Martin - Info Sheet

- All students must have a signed permission form to ride the bus.
- All students riding to the game on the bus must return to Jesuit on the bus – **NO EXCEPTIONS.**
- Students should report to the Roussell Bldg on Saturday, February 28, 2026 @ 5:15 PM.
- Students should wear attire appropriate for a Jesuit athletic event (Blue/white Jesuit apparel recommended).
- **All students travelling on the Spirit Bus will receive a FREE gameday spirit shirt.**
- Game tickets must be purchased on your own for \$20 (See QR code below to purchase tickets online.)
- Once at the game, students are not allowed to leave the stadium.
- Students should report to the bus immediately following the conclusion of the game & trophy presentation.
- We anticipate arriving back to Jesuit around 11:30 PM depending on what time the game ends.
- Students will be instructed to contact their rides when we are 30 min. away from Jesuit.



Purchase Tickets to Game using this QR Code.