

Dear Parents/Guardians & Youth:

Routes Youth Centre is going on a trip to **Gage Park Green House! (1000 Main St E Hamilton)** Join us to visit Gage Park to walk through the tropical garden, splash in the splash pad and have a picnic lunch!

<i>Date</i>	Wednesday, July 09, 2025	<i>Time</i>	12pm - 5pm
<i>Location</i>	Meet at Routes, travel to Gage Park 1000 Main St E Hamilton ON L8M 1N2		
<i>Cost</i>	FREE		
<i>Transportation</i>	City Bus, Hamilton Street Railway (HSR)		
<i>Important Information</i>	<ul style="list-style-type: none"> <li>• Spots are limited. To ensure you have a spot on the trip hand in your permission form as soon as possible.</li> <li>• Routes will provide a picnic lunch, please pack sunscreen and change of clothes for the splash pad</li> <li>• An Emergency Contact Card (see back) must be filled out</li> </ul>		

\*Questions regarding the trips text/call Routes @ 905-929-0572

I \_\_\_\_\_ (parent/guardian), grant permission for

\_\_\_\_\_ (youth's name) to attend the **Gage Park Green**

**House Trip.** I understand that Routes Youth Centre and/or the Dundas Youth

Chaplaincy are not liable for any incident(s) that may occur during this trip.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (or youth if 16 or older)

☐

I have completed the Emergency Contact Card (see back)

**Our Picnic Lunch will be pizza buns, a small bag of chips, and a juice box. Youth are welcome to bring their own food/drink to supplement.**

Please sign and return as soon as possible to reserve your spot

Dear Parent(s)/Guardians(s):

Routes Youth Centre requires the parent/guardian of each youth who wishes to attend any trip to fill out the **Emergency Contact Card** provided below. If there are any questions regarding this form please call or text: 905-929-0572

### EMERGENCY CONTACT CARD

Name of Youth \_\_\_\_\_ Pronouns \_\_\_\_\_

Date of Birth (DD/MM/YY) \_\_\_\_\_ Age \_\_\_\_\_

Allergies/Chronic Illness: \_\_\_\_\_

Will youth take any medication at Routes (e.g. inhaler)? Y / N If you circled yes, please provide any details we might need to know (e.g. will youth carry it, does it require refrigeration, etc.):

#### Parent/Guardian:

Name \_\_\_\_\_ Relation to youth \_\_\_\_\_

Main phone # \_\_\_\_\_ Text capable: Y / N (circle one)

Other phone # (if applicable) \_\_\_\_\_

#### Emergency Contact #2

Name \_\_\_\_\_ Relation to youth \_\_\_\_\_

Main phone # \_\_\_\_\_ Text capable: Y / N (circle one)

Other phone # (if applicable) \_\_\_\_\_

#### Emergency Contact #3

Name \_\_\_\_\_ Relation to youth \_\_\_\_\_

Phone # \_\_\_\_\_ Text capable: Y / N (circle one)

Other phone # (if applicable) \_\_\_\_\_

*In an emergency, the listed parent/guardian would be contacted first. If parent/guardian listed above cannot be reached, Contact #2 followed by Contact #3 would be contacted.*

**Any other important information we should know:**

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