Oyster River Cooperative School District
Voluntary Field Trip Permission Form
And Release and Indemnification Agreement

I/We, _________________________ the parent(s) or guardian(s) of ______________________ give my/our permission for my/our child to participate in a field trip. I/We understand that participation in this field trip is voluntary and that an alternative activity will be available to my/our child. I/We are allowing our child to participate only after understanding and considering the following:

1. Description of field trip (including dates, times, and places of departure and return):
______________________________________________________________________
______________________________________________________________________

2. Purpose of the field trip: ______________________________________________
______________________________________________________________________

3. Planned activities during field trip: ______________________________________
______________________________________________________________________

4. Alternative to the field trip: ____________________________________________

5. Supervision: __________________________________________________________

6. Transportation: _______________________________________________________

7. Requirements (clothing, equipment, supplies): _____________________________

By signing this permission form, I/we acknowledge the following:

A. The Oyster River School District __________________School cannot ensure the safety of my/our child and cannot assume the responsibility for spontaneous, unforeseeable injuries that could not have been prevented by reasonable care. The school’s obligation is to take reasonable precautions for safety and well-being. Your child also has a responsibility for his/her safety and the safety of others.

B. I/We must provide the school staff and chaperones with medical or other important information that I/we feel that the school should know about our son/daughter. This information will be kept confidential.

C. My/Our child must adhere to all the rules, regulations, and instructions pertaining to the safety and protection of the participants and that failure to comply could exclude my/our child from participation in this activity.

D. I/We will bear any cost for additional transportation, if our child leaves or is asked to leave the activity before completion.

E. I/We acknowledge and understand the risk and requirements for our child to participate in this school-supported off-campus field trip.
OYSTER RIVER COOPERATIVE SCHOOL DISTRICT  
VOLUNTARY  
RELEASE AND INDEMNIFICATION AGREEMENT  

In consideration of the permission granted to my child to participate in the above-described activity by the Oyster River Cooperative School District, I/We release, indemnify and hold harmless the __________________________ School and District, its agents, employees, officers and trip supervisors/chaperons from any and all actions or causes of action of any nature (including claims for negligence and) for personal injury or property damage of any kind arising in any way from my child’s participation in the above-described school activity. I further acknowledge that this release is binding upon my heirs, successors and assigns; that I have read the foregoing and understand its significance and that I have executed this document voluntarily.

I HAVE READ AND UNDERSTAND THIS PERMISSION FORM

Date: ________________________  ____________________________________________  
                 Parent/Guardian

Date: ________________________  ____________________________________________  
                 Parent/Guardian