BRIDGEWATER-RAYNHAM REGIONAL SCHOOL DISTRICT
FIELD TRIP PARENTAL CONSENT, RELEASE FROM LIABILITY
AND INDEMNITY AGREEMENT

I give permission for my son/daughter (name) __________________________
to attend any of the following Ski Trips with the Raynham Middle School Ski Club:

- Saturday, January 11, 2020 to Bretton Woods, Bretton Woods, NH
- Saturday, January 25, 2020 to Cannon Mtn, NH
- Saturday, February 8, 2020 to Loon Mountain
- Saturday, March 7, 2020 to TBD (Weather Date)

We the undersigned father and mother or guardian(s) of the above named student, a minor, do hereby consent to his/her participation in the above referenced event and do forever RELEASE, acquit, discharge and covenant to hold harmless the Bridgewater-Raynham Regional School District and the Towns of Bridgewater and Raynham, municipal corporations of the State of Massachusetts, and their successors, departments, officers, employees, servants, and agents of and from any and all actions, causes of action, claims, damages, demands, costs loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which WE/I may now or hereafter have as the parent(s) or guardian(s) of said minor, and also all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in the above referenced event. FURTHERMORE, WE/I hereby agree to protect the Bridgewater-Raynham Regional School District and the Towns of Bridgewater and Raynham and their successors, departments, officers, employees, servants and agents against any claim for damages, compensation or otherwise on the part of said minor growing out of or resulting from injury to said minor in connection with his/her participation in the above referenced event, and to INDEMNIFY, reimburse or make good to the Bridgewater Raynham Regional School District, the Towns of Bridgewater and Raynhamp and their successors, department, officers, employees, servants and agents any loss or damage or costs including attorney’s fees, the Town or their representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent, or reckless acts or omissions while participating in said field trip as referenced above.

STUDENTS ARE SUBJECT TO SCHOOL RULES AND REGULATIONS WHILE ON A FIELD TRIP. ANY STUDENT WHO VIOLATES SCHOOL RULES AND REGULATIONS WILL BE SUBJECT TO DISCIPLINARY ACTION AS PRESCRIBED IN THEIR SCHOOL’S STUDENT/PARENT HANDBOOK. ANY STUDENT FOUND GUILTY OF USING, POSSESSING, AND/OR DISTRIBUTING DRUGS, AND/OR ALCOHOL, WILL BE DISCIPLINED IN ACCORDANCE WITH THE STUDENT/PARENT HANDBOOK. IN ADDITION, WHEN THE ALCOHOL/DRUG POLICY IS VIOLATED ON AN OVERNIGHT TRIP, PARENTS WILL BE REQUIRED AT THEIR EXPENSE, AND AS SOON AS POSSIBLE, TO PICK THEIR SON/DAUGHTER UP AT THE SITE OF THE TRIP. THIS MAY BE WAIVED AT THE DISCRETION OF THE ADMINISTRATION IF OR WHEN THE DISTANCE IS PROHIBITIVE.

My child and I acknowledge and understand the following: He/she must wear a helmet or they cannot ski/board; must not switch equipment with any other student; will not ski/board on trails above their ability level; will not ski/board alone; any student caught breaking these rules, will be sitting in the lodge with Mr. Flannery for the remainder of the day. We understand that in the event my child needs to be transported to a medical facility, we acknowledge and understand that the trip leader or a chaperone may not be able to accompany my child to the medical facility, and that I will need to leave immediately to join my child. We agree with the behavioral expectations for participation, and that if in the judgment of the trip leader, or chaperones, the behavior of my child becomes a danger to the group or to him/herself, I will drive to New Hampshire to pick up my child.

(Signature needed) Parent/Guardian __________________________ (Date)

Home phone number __________________________ Alternate phone number __________________________

Emergency Contact __________________________ Emergency Phone number __________________________

End of document.