

100 Walnut Street Newton, MA 02460

#### <u>DAY FIELD TRIP</u> CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT

#### Parent/Guardian

the undersigner to his/her participation in a da (Field Trip") planned for Sat Oct 20, 20 RELEASE and discharge the City of Newton hereinafter collectively referred to as "Nof whatever kind or nature which I/we manner arising out of or resulting from, directions in the content of the conten	0 <u>18</u> , and sponsored by the Ne on and its departments, office ewton") from any and all clai aay have or acquire as the par	(hereafter referred to as the wton Public Schools. I/WE ers, employees, and agents ms, demands, losses or expenses tent(s) or guardian(s) of said
/WE furthermore agree to defend and II of whatever kind or nature that Newton records negligent or reckless acts or omis	nay have to pay that arises fr	om said minor's intentional,
/We hereby authorize Newton's employed the hereby authorizing and consenting to ender a sinjured while participating in the Field appropriate emergency medical staff at sufference and discharge Newton from any of the decision to provide emergency medical staff at sufference and discharge Newton from any of the decision to provide emergency medical staff at the decision to the decision to provide emergency medical staff at the decision to the de	mergency medical care for sa Trip. This Authorization and uch time as emergency medic y and all claims of any nature	id minor if he/she becomes ill or Consent may be presented to the cal care is required. I/We hereby
Signature of Parent or Guardian	Date	Relationship
Signature of Parent or Guardian	Date	Relationship
Swimming/Water Activities Consent	and Release from Liability	and Indemnity Agreement
I/WE understand that this field trip and details of which have been provided to minor child's participation in the swims program.	me/us. By signing below, I/V	VE hereby CONSENT to my
Signature of Parent or Guardian	Date	Relationship

THIS FORM MAY NOT BE ALTERED



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#### Parent/Guardian

	4.4		
I/We,	, the undersigned	parent(s) or guardian(s) of	, do hereby
			(hereafter referred to as th
"Field Trip") plant	ned for Sat Jan 5, 2019	and sponsored by the New	ton Public Schools. I/WE
		and its departments, officer	
(hereinafter collec	tively referred to as "Nev	wton") from any and all clain	ns, demands, losses or expenses
		y have or acquire as the pare	
		ctly or indirectly, his/her par	
of whatever kind o	or nature that Newton ma	DEMNIFY Newton against an ay have to pay that arises fro ons while participating in the	
behalf in authorizi is injured while pa appropriate emerg RELEASE and disc	ng and consenting to emo articipating in the Field To gency medical staff at suc	ergency medical care for said rip. This Authorization and C th time as emergency medica and all claims of any nature v	vising said minor to act on our I minor if he/she becomes ill or onsent may be presented to the I care is required. I/We hereby whatsoever, which may arise out
Signature of Pare	ent or Guardian	Date	Relationship
Signature of Pare	ent or Guardian	Date	Relationship
Swimming/Wat	ter Activities Consent a	nd Release from Liability a	nd Indemnity Agreement
details of which	have been provided to m	or program involves swimm: e/us. By signing below, I/W ing and/or water activities as	
Ci			Deletion ships
Signature of Pare	ent or Guardian	Date	Relationship

THIS FORM MAY NOT BE ALTERED



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#### Parent/Guardian

I/We,	, the undersigned r	parent(s) or guardian(s) of	f, do hereby
,			(hereafter referred to as th
"Field Trip") planı	ned for <u>Mar 8-10</u> , 20 <u>19</u>	, and sponsored by the Ne	wton Public Schools. I/WE
	harge the City of Newton a		
(hereinafter collec	tively referred to as "New	ton") from any and all clai	ms, demands, losses or expenses
of whatever kind o	or nature which I/we may	have or acquire as the par	ent(s) or guardian(s) of said
minor arising out	of or resulting from, direct	ly or indirectly, his/her pa	articipation in the Field Trip.
of whatever kind o		have to pay that arises fr	ny claim, damage, loss or expense om said minor's intentional, ne Field Trip.
behalf in authorizi is injured while pa appropriate emer RELEASE and disc	ng and consenting to emer articipating in the Field Tri gency medical staff at such	rgency medical care for sa p. This Authorization and time as emergency medic nd all claims of any nature	rvising said minor to act on our id minor if he/she becomes ill or Consent may be presented to the all care is required. I/We hereby whatsoever, which may arise out
Signature of Par	ent or Guardian '	Date	Relationship
Signature of Par	ent or Guardian	Date	Relationship
Swimming/Wa	ter Activities Consent an	d Release from Liability	and Indemnity Agreement
			ning and water activities, the VE hereby CONSENT to my
			associated with this field trip or
Signature of Par	ent or Guardian	Date	Relationship

#### THIS FORM MAY NOT BE ALTERED



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# DAY FIELD TRIP CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT

#### Parent/Guardian

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ONSENT to his/her participation in a day Field Trip") planned for Apr 10-13 , 201 ELEASE and discharge the City of Newton hereinafter collectively referred to as "Nef whatever kind or nature which I/we ma	r field trip to <u>NE DCMP</u> 9, and sponsored by the Ne n and its departments, office ewton") from any and all clai by have or acquire as the par	(hereafter referred to as the wton Public Schools. I/WE ers, employees, and agents ms, demands, losses or expenses rent(s) or guardian(s) of said
/WE furthermore agree to defend and IN f whatever kind or nature that Newton m	DEMNIFY Newton against a lay have to pay that arises fr	ny claim, damage, loss or expense om said minor's intentional,
ehalf in authorizing and consenting to em injured while participating in the Field T ppropriate emergency medical staff at su ELEASE and discharge Newton from any	nergency medical care for sa Trip. This Authorization and ch time as emergency medic and all claims of any nature	id minor if he/she becomes ill or Consent may be presented to the cal care is required. I/We hereby
Signature of Parent or Guardian	Date	Relationship
Signature of Parent or Guardian	Date	Relationship
Swimming/Water Activities Consent a	and Release from Liability	and Indemnity Agreement
details of which have been provided to n	ne/us. By signing below, I/V	VE hereby CONSENT to my
Signature of Parent or Guardian	Date	Relationship
	ONSENT to his/her participation in a day Field Trip") planned for Apr 10-13	ONSENT to his/her participation in a day field trip to NE DCMP Field Trip") planned for Apr 10-13

#### THIS FORM MAY NOT BE ALTERED