## NEWTON PUBLIC SCHOOLS <u>DAY/EXTENDED LONG DISTANCE TRIP</u> <u>CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT</u> <u>Parent</u>

I/We, the undersigned parent(s) or guardian(s) of	, a minor, do
hereby CONSENT to his/her participation in day or extended long distance field trip	to
SOPHOMORE FEST (hereafter referred to as the "Field Trip") planned for May and sponsored by the Newton Public Schools. I/We RELEASE and discharge the Cit and its departments, officers, employees, and agents (hereinafter collectively referred "Newton"), from any and all claims, damages, losses or expenses of whatever kind of I/we may have or acquire as the parent(s) or guardian(s) of said minor arising out of directly or indirectly, from said minor's participation in the Field Trip. I/We also REI discharge Newton from any and all claims, damages, losses or expenses of whatever which said minor may have or acquire arising out of or resulting from, directly or indirectly or indirectly or incomparticipation in the Field Trip. I/We furthermore agree to defend and INDEMNIFY Nany claim, damage, loss or expense of whatever kind or nature that Newton may have arises from said minor's intentional, grossly negligent, or reckless acts or omissions of participating in the Field Trip. I/We hereby authorize Newton's employee(s) or agent supervising said minor to act on our behalf in authorizing and consenting to emergent for said minor if he/she becomes ill or is injured while participating in the Field Trip. Authorization and Consent may be presented to the appropriate emergency medical stime as emergency medical care is required. I/We hereby RELEASE and discharge Newton's employee (s) or agent supervision and consent may be presented to the appropriate emergency medical stime as emergency medical care is required. I/We hereby RELEASE and discharge Newton's employee (s) or agent supervision and consent may be presented to the appropriate emergency medical stime as emergency medical care is required. I/We hereby RELEASE and discharge Newton's employee (s) or agent supervision and consent may be presented to the appropriate emergency medical stime as emergency medical care is required.	y 3rd, 2013, y of Newton I to as r nature which or resulting, LEASE and kind or nature lirectly, his/her Newton against e to pay that while (s) who is cy medical care at aff at such
time as emergency medical care is required. I/We hereby RELEASE and discharge N any and all claims of any nature whatsoever, which may arise out of the decision to p	
emergency medical care.	TOVICE
Signature of Parent or Guardian Date Relationship	
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THIS FORM MAY NOT BE ALTERED Revised: 9/02	
The superintendent reserves the right to cancel any field trip up until the time of department.	ırture.

Approved by School Committee June 10, 2002

## Hypnosis Show Consent

I hereby give consent for my son/daughter to participate,	if chosen, in the hypnosis
show at the Sophomore Fest on May 3, 2013.	
Student name:	
Parent Signature	Date