

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

**Parent/Guardian**

I/We, \_\_\_\_\_, the undersigned parent(s) or guardian(s) of \_\_\_\_\_, do hereby CONSENT to his/her participation in a day field trip to \_\_\_\_\_ (hereafter referred to as the "Field Trip") planned for \_\_\_\_\_, 20\_\_, and sponsored by the Newton Public Schools. I/WE RELEASE and discharge the City of Newton and its departments, officers, employees, and agents (hereinafter collectively referred to as "Newton") from any and all claims, demands, losses or expenses of whatever kind or nature which I/we may have or acquire as the parent(s) or guardian(s) of said minor arising out of or resulting from, directly or indirectly, his/her participation in the Field Trip.

I/WE furthermore agree to defend and INDEMNIFY Newton against any claim, damage, loss or expense of whatever kind or nature that Newton may have to pay that arises from said minor's intentional, grossly negligent or reckless acts or omissions while participating in the Field Trip.

I/We hereby authorize Newton's employee(s) or agent(s) who is supervising said minor to act on our behalf in authorizing and consenting to emergency medical care for said minor if he/she becomes ill or is injured while participating in the Field Trip. This Authorization and Consent may be presented to the appropriate emergency medical staff at such time as emergency medical care is required. I/We hereby RELEASE and discharge Newton from any and all claims of any nature whatsoever, which may arise out of the decision to provide emergency medical care.

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/or program involves swimming and water activities, the details of which have been provided to me/us. By signing below, I/WE hereby CONSENT to my minor child's participation in the swimming and/or water activities associated with this field trip or program.

Signature of Parent or Guardian	Date	Relationship
---------------------------------	------	--------------

THIS FORM MAY NOT BE ALTERED

The superintendent reserves the right to cancel any field trip up until the time of departure.