

Sakura Gakuen Field Trip – Release Form – 2014-15

>>>> This page is REQUIRED of ALL those under 18 years old ATTENDING the field trip <<<<

RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND OF LIABILITY, WAIVER OF CLAIMS, AND RELEASE OF LIABILITY AND AUTHORIZATION FOR MEDICAL TREATMENT

In consideration of my Child's participation in the field trip to _____ [insert event] in Sacramento, California (the "Field Trip") on Saturday, January 31 [insert date], 2015, I hereby agree as follows: I, _____, [insert your name] enter into this agreement individually and on behalf of

_____ [insert name of child] (the "Child"), my son/daughter/ward, who is not eighteen (18) years of age. For myself and my Child, and for our respective estates, heirs, administrators, executors, and assigns, I hereby release and hold harmless the Sakura Gakuen Japanese Language School staff, Board of Trustees and its PTC officers, the Buddhist Church of Sacramento and its Board of Trustees, and their officers, directors, employees, representatives, agents, and volunteers (collectively, the "Releasees"), from any and all liability and responsibility whatsoever, however caused, for any and all damages, claims, or causes of action that I or my Child, or our respective estates, heirs, administrators, executors, or assigns may have for any loss, illness, personal injury, death, or property damage arising out of, connected with, or in any manner pertaining to the my child's participation in the Field Trip, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.

I fully understand that there are potential risks and hazards associated with the Field Trip and its related travel, including, but not limited to, possible injury or loss of life. I understand that the Releasees do not in any manner serve as principal, agent, or partner of any commercial carrier or food establishment which may provide services to participants. Despite the potential risks and hazards associated with the Field Trip, I, individually and on my Child's behalf, wish for him or her to proceed, and freely accept and assume all risks and hazards that may arise from his or her participation in the Field Trip and that could result in loss, illness, personal injury, death, or property damage to him or her, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES or otherwise.

I further hereby agree to indemnify and hold harmless the Releasees from any judgment, settlement, loss, liability, damage, or costs, including court costs and attorney fees for both the trial and appellate levels, that Releasees may incur as a proximate result of any negligent or deliberate act or omission by my Child during his or her participation in the Field Trip.

AUTHORIZATION FOR TREATMENT

As the parent/guardian of the above named student, I hereby give authorization to the staff to take my child to an emergency room of the nearest hospital should, for any reason, they require any minor medical or surgical treatment and/or medication while participating in an approved field trip activity. I further authorize the hospital and its medical staff to administer treatment as deemed necessary by them for the well-being of said student. I understand that staff will make attempts to notify me in all medical emergencies, and I will be contacted, if possible, for my permission if hospitalization or treatment of a serious nature is required.

HEALTH INSURANCE INFORMATION: Insurance Carrier: _____

Group No.: _____ Name of Insured: _____

I understand it is my responsibility to confirm, at least 2 days before the Field Trip that the medical emergency contact information provided when enrolling is current. If it is not, I will update it 2 days before the Field Trip.

In signing this agreement, I acknowledge and represent that I have read and understand it; that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same; and that I am at least eighteen (18) years of age, fully competent, and the legal parent or guardian of my Child.

I HAVE READ THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND AGREE INDIVIDUALLY AND ON BEHALF OF MY CHILD TO BE BOUND BY IT.

PARENT'S NAME (PRINTED) _____

PARENT'S SIGNATURE: _____ DATE: _____

TELEPHONE NUMBERS WHERE I CAN BE REACHED IN EVENT OF EMERGENCY:

Primary: _() _____ Secondary: _() _____

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>>>> This page is REQUIRED of ALL those over 18 years old ATTENDING the field trip <<<<< including all adult chaperones/drivers.

>>>> Photocopy of valid auto insurance coverage must be provided prior to the trip, for all chaperones transporting students by motor vehicle. <<<<<

RELEASE OF LIABILITY, WAIVER OF CLAIMS, EXPRESS ASSUMPTION OF RISKS, AND HOLD HARMLESS AGREEMENT

In consideration of participating in the educational field trip to _____ [insert event], in Sacramento, California (the "Field Trip") on Saturday, January 31 [insert date], 2015,, I hereby agree as follows: I, _____, [insert your name]for myself and my estate, heirs, administrators, executors, and assigns, hereby release and hold harmless the Sakura Gakuen Japanese Language School staff, Board of Trustees and its PTC officers, the Buddhist Church of Sacramento and its Board of Trustees, and their officers, directors, employees, representatives, agents, and volunteers (collectively, the "Releasees"), from any and all liability and responsibility whatsoever, however caused, for any and all damages, claims, or causes of action that I, my estate, heirs, administrators, executors, or assigns may have for any loss, illness, personal injury, death, or property damage arising out of, connected with, or in any manner pertaining to the Field Trip, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.

I fully understand that there are potential risks and hazards associated with the Field Trip and its related travel, including, but not limited to, possible injury or loss of life. Despite the potential risks and hazards associated with the Field Trip, I wish to proceed, and freely accept and assume all risks and hazards that may arise from my participation in the Field Trip and that could result in loss, illness, personal injury, death, or property damage, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.

I further hereby agree to indemnify and hold harmless the Releasees from any judgment, settlement, loss, liability, damage, or costs, including court costs and attorney fees for both the trial and appellate levels that Releasees may incur as a proximate result of any negligent or deliberate act or omission on my part during my participation in the Field Trip.

In signing this agreement, I acknowledge and represent that I have read and understand it; that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same; and that I am at least eighteen (18) years of age and fully competent.

I HAVE READ THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND VOLUNTARILY AGREE TO BE BOUND BY IT.

NAME (PRINTED) _____

SIGNATURE _____

DATE _____

PHONE (for chaperones - during trip) _____

Office Use Only:
 Chaperone Driver Insurance Card Copy Chaperone Phone Emergency Info
Notes: