

THE CARROLL SCHOOL BOUNDERS PROGRAM
VOLUNTARY PERMISSION SLIP
ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AND
RELEASE AND INDEMNIFICATION

Please read this document carefully before signing. It contains information about The Carroll School Bounders Program (hereinafter referred to as “Program”) and advices of its certain risks. Student and family are asked to acknowledge and assume risks for involvement in the Program and waive claims they might have in the event of injury or other loss. This document must be signed by a parent or legally appointed guardian of the student participating in the activity.

Permission/Intent to Participate in the Program

_____ will participate in voluntary Bounders activities during the School Year.

Acknowledgements and Agreements of Parent

I, Parent/Guardian (hereinafter “parent”) of minor Student acknowledge and agree as follows:

I. Acknowledgement of Program Information:

1. I understand that all persons participating in a Bounders activity shall be deemed to have waived all claims against The Carroll School for injury, illness or death or by reason of an activity. I acknowledge this trip is optional and voluntary and that attendance by the Student is not required.
2. I acknowledge that each Student going on a trip will be help responsible for his/her conduct during the trip. It is understood that the Student will follow direction from the bus driver(s), teacher(s), chaperone(s) and, if applicable, adult sponsors, at all times. I acknowledge that the Student is to abide by all rules and regulations governing conduct during the trip. Any violation of these rules and regulations may result in a student being sent home without reimbursement.
3. I acknowledge that the Program reserves the right to dismiss any Student from a trip or program that staff believes to present a safety concern or medical risk, is disruptive, and/or otherwise conducts themselves in a manner detrimental to the Program. If a Student is dismissed or leaves a trip for any reason his/her parent/guardian are responsible for all costs of early departure. These costs include, but are not limited to, medical evacuation and costs, travel, and compensation and expenses for staff who may need to accompany the Student.
4. I acknowledge that the Student is fully capable of participating in these activities without causing harm to him/herself or others.
5. I acknowledge that engaging in this activity may require a degree of skill and knowledge different from other activities in which the Student may have participated in the past. I acknowledge that I have read and understand the general information provided by the Program and that I will have an opportunity to speak with the staff of the Program about the nature and physical demands of each activity and the risks, hazards, and dangers, inherent or otherwise associated with these activities.
6. I acknowledge that each Student is required to go and return from a trip by means of the transportation provided unless prior arrangements have been made with a Bounders Teacher.
7. Parent of minor Student may be held liable and responsible for any injury or death to another person or injury to property of another caused by the minor Student, as required by law.

II. Program Activities and Risks

I have read and understand the included material entitled “Bounders Activities and Risks” and I know that I can contact the Program staff with any questions regarding the Program and its activities and risks.

III. Acknowledgement and Assumption of Risks

1. I acknowledge and understand that the description of activities and risks referred to in Section II above is NOT complete and that all activities, whether or not described, may be dangerous and include risks which are inherent and cannot be reasonably avoided without changing the nature of the activity. I acknowledge that participation in the activities can cause personal injury, including emotional trauma and even death.
2. I acknowledge and expressly assume all risks and dangers associated with all activities, whether described above, known or unknown, and inherent or otherwise. I take full responsibility for any injury or loss, including death, which I may suffer arising in whole or in part from my enrollment and participation or the enrollment and participation of the minor Student for whom I sign in the activities of the Program.

IV. Agreements and Release and Indemnity

1. I, Parent of minor Student, for myself and on behalf of the minor Student for whom I sign (hereinafter "I") agree as follows:
2. In addition to the waiver of immunity I RELEASE AND DISCHARGE (agreeing to make no claim), and not to sue The Carroll School its officials, employees, its governing board, the individual members thereof, trustees, officers (individually and collectively referred to as "Released Parties") from all claims of injury or loss which I, or the minor Student for whom I sign, may suffer arising in whole or in part from the Student's enrollment or participation in an activity of the Program, except in cases of intentional wrongs or the gross negligence of a Released Party.
3. In addition, I HEREBY AGREE TO INDEMNIFY ("indemnify" meaning to defend and satisfy by payment or reimbursement including costs and attorney fees), AND HOLD HARMLESS Released Parties with respect to any and all claims of injury, disability, death, or other loss or damage to person or property suffered to me, by a minor Student for whom I sign, by any member of my family, rescuers, co-students, or any other person arising in whole or in part from my, or the minor Student's enrollment or participation in an activity of the Program.
4. These agreements of release and indemnity include loss or damage caused or claimed to be caused in whole or in part by the negligence of a Released Party.

BY SIGNING BELOW PARENT/GUARDIAN OF A MINOR STUDENT ACKNOWLEDGE AND AGREE TO THE TERMS OF THIS VOLUNTARY OUTDOOR EDUCATION PERMISSION SLIP, ACKNOWLEDGEMENT AND ASSUMPTION OF RISK RELEASE AND INDEMNIFICATION DOCUMENT.

Signature of Parent/Guardian

I am signing as parent/guardian to reflect my agreement and acceptance of the provisions of this Bounders Trip Permission Slip, Acknowledgement and Assumption of Risk and Release and Indemnification document and I hereby agree that each such provision shall apply to me both in my individual capacity and in my capacity as parent/guardian of the minor Student on whose behalf I also sign.

Date: _____

Signature of Parent/Guardian

Parent/Guardian Name (Please print)

BOUNDERS ACTIVITIES AND RISKS

PLEASE INITIAL BELOW TO INDICATE THAT YOU HAVE READ AND UNDERSTAND THE ACTIVITIES AND THEIR ASSOCIATED RISKS

Activities	Risks (These include but are not limited to losses caused)	Parent Initials
Wilderness Activities (these also apply to all activities below)	Transportation by vehicle, hypothermia, dehydration, falling into moving or standing water, campfire, food preparation, food poisoning, extreme weather (wind, rain, snow, lightning, hail), falling rocks and branches, unstable ground, animals attacks, poisonous insects and plants, allergic reactions, and the actions of other students	
Hiking (on and off trail)	Slipping and falling, joint injuries	
Challenge Courses	Falling from height, impact of falling objects (e.g. rocks, equipment, people), rope and equipment contact injuries	
Canoeing, rowing, sea-kayaking, flat water, rivers and oceans	Water drowning, hypothermia, and carrying boats	
Rock Climbing (top-roping and bouldering)	Falling from height, impact of falling objects (e.g. rocks, equipment, people), rope and equipment contact injuries	
Outdoor Overnight camping	Cooking over camp stoves, hypothermia	

