



Beantown Blitz
Revere High School
Revere, MA
October 19, 2019

NEWTON PUBLIC SCHOOLS

100 Walnut Street
Newton, MA 02460

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 Revere High School (hereafter referred to as the "Field Trip") planned for Sat Oct 19, 2019, 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.



NEWTON PUBLIC SCHOOLS

100 Walnut Street
Newton, MA 02460

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 NH Kickoff _____ (hereafter referred to as the "Field Trip") planned for Sat Jan 4, 20²⁰, 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.



NE Greater Boston District
 Revere High School
 Revere, MA
 March 27-29 2020

NEWTON PUBLIC SCHOOLS

100 Walnut Street
 Newton, MA 02460

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 Revere High School (hereafter referred to as the "Field Trip") planned for Mar 27-29, 2020, 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
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THIS FORM MAY NOT BE ALTERED
 The superintendent reserves the right to cancel any field trip up until the time of departure.



NEWTON PUBLIC SCHOOLS

FIRST Robotics New England Championships
West Springfield, MA April 8-11 2020

100 Walnut Street
Newton, MA 02460

CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT
OVERNIGHT TRIP (IN-STATE AND OUT-OF-STATE)
Parent/Guardian

I/We, the undersigned parent(s) or guardian(s) of _____, a minor, do hereby CONSENT to his/her participation in the LigerBots Program educational trip to _____ West Springfield, MA (hereafter referred to as the "Program") planned for _____ April 8-11 2020 through _____, 20____, and sponsored by the Newton Public Schools.

I/We forever 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, damages, 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, directly or indirectly, from said minor's participation in the Program. I/We also RELEASE and discharge Newton from any and all claims, damages, losses or expenses of whatever kind or nature which said minor may have or acquire arising out of or resulting from, directly or indirectly, his/her participation in the Program.

I/We furthermore agree to defend and INDEMNIFY 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 Program.

I/We hereby authorize Newton's employee(s) or agent(s) who is supervising said minor, and/or the host family of said minor (if applicable) to act on our behalf in authorizing and consenting to emergency medical care including surgery, if necessary, dental care, and/or hospitalization for said minor if he/she becomes ill or is injured while participating in the Program. This Authorization and Consent may be presented to the appropriate medical/dental staff at such time as emergency medical care, dental care or hospitalization 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, dental care or hospitalization during the Program.

I/We also hereby authorize Newton, acting through the Superintendent of Public Schools or his/her designee, to cancel, reschedule or alter in any other manner the Program whenever he/she determines in his/her sole discretion that such cancellation, rescheduling or alteration is required in order to protect the safety and welfare of said minor. I/We agree to release Newton from any claim for damages or loss that I/we may incur by reason of such cancellation, rescheduling or alteration.

CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT

OVERNIGHT TRIP (IN-STATE AND OUT-OF-STATE)

Parent/Guardian

Page Two

I/We further authorize Newton's employee(s) or agent(s) who is supervising said minor while participating in the Program to require said minor to comply with any rules, standards of behavior or instructions such employee(s) or agent(s) may reasonably establish. I/We agree that such employee(s), or agent(s) shall have the right to enforce

such rules, standards of behavior or instructions and shall have the further right to terminate said minor's participation in the Program at any time when such employee(s) or agent(s) considers the conduct of said minor incompatible with the interest, harmony, comfort or welfare of the other participants in the Program or with said minor's own safety or welfare. Possession, sale, distribution or use of illegal drugs, alcohol or a weapon(s) will constitute grounds for terminating said minor's participation. If said minor's participation is terminated, I/we consent to have said minor sent home in the most expeditious manner without refund at my/our expense. I/We accept in good faith the determination of such employee(s) or agent(s) in all matters relating to the supervision of said minor while in the Program.

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.



NEWTON PUBLIC SCHOOLS

FIRST Robotics World Competition
Detroit MI, April 28-May 4 2020

100 Walnut Street
Newton, MA 02460

CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT
OVERNIGHT TRIP (IN-STATE AND OUT-OF-STATE)
Parent/Guardian

I/We, the undersigned parent(s) or guardian(s) of _____, a minor, do hereby CONSENT to his/her participation in the LigerBots Program educational trip to _____
Detroit MI (hereafter referred to as the "Program") planned for _____
April 28-May 4 2020 through _____, 20____, and sponsored by the Newton Public Schools.

I/We forever 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, damages, 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, directly or indirectly, from said minor's participation in the Program. I/We also RELEASE and discharge Newton from any and all claims, damages, losses or expenses of whatever kind or nature which said minor may have or acquire arising out of or resulting from, directly or indirectly, his/her participation in the Program.

I/We furthermore agree to defend and INDEMNIFY 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 Program.

I/We hereby authorize Newton's employee(s) or agent(s) who is supervising said minor, and/or the host family of said minor (if applicable) to act on our behalf in authorizing and consenting to emergency medical care including surgery, if necessary, dental care, and/or hospitalization for said minor if he/she becomes ill or is injured while participating in the Program. This Authorization and Consent may be presented to the appropriate medical/dental staff at such time as emergency medical care, dental care or hospitalization 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, dental care or hospitalization during the Program.

I/We also hereby authorize Newton, acting through the Superintendent of Public Schools or his/her designee, to cancel, reschedule or alter in any other manner the Program whenever he/she determines in his/her sole discretion that such cancellation, rescheduling or alteration is required in order to protect the safety and welfare of said minor. I/We agree to release Newton from any claim for damages or loss that I/we may incur by reason of such cancellation, rescheduling or alteration.

CONSENT FORM, RELEASE FROM LIABILITY & INDEMNITY AGREEMENT

OVERNIGHT TRIP (IN-STATE AND OUT-OF-STATE)

Parent/Guardian

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such rules, standards of behavior or instructions and shall have the further right to terminate said minor's participation in the Program at any time when such employee(s) or agent(s) considers the conduct of said minor incompatible with the interest, harmony, comfort or welfare of the other participants in the Program or with said minor's own safety or welfare. Possession, sale, distribution or use of illegal drugs, alcohol or a weapon(s) will constitute grounds for terminating said minor's participation. If said minor's participation is terminated, I/we consent to have said minor sent home in the most expeditious manner without refund at my/our expense. I/We accept in good faith the determination of such employee(s) or agent(s) in all matters relating to the supervision of said minor while in the Program.

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