

NOTRE DAME DE LA BAIE ACADEMY, INC.
PERMISSION/CONSENT FORM
RELEASE AND HOLD HARMLESS AGREEMENT

Student Name:	Event or Experience: ASTRA Community Service Events
Parent/Guardian Name(s):	Educational Purpose: Opportunity for students to perform service in the community. Parents/Students must check this website for the educational purpose of each particular event: http://ndaastra.weebly.com/
Numbers where parent/guardian can be reached: Home# _____ Cell# _____ Work # _____	Location: Parents/Students must check this website for location of each particular event: http://ndaastra.weebly.com/
Adult Leader: Parents/Students must check this website for the name and contact information of the adult leader for each particular event: http://ndaastra.weebly.com/	Date and Time: Parents/Students must check this website for exact start and end time of each particular event: http://ndaastra.weebly.com/
Additional Information: ASTRA Website has the most current information for each particular event. This permission slip covers all events from August 1, 2015 – July 31, 2016. http://ndaastra.weebly.com/	Mode of Transportation: Students provide their own

I, as parent or legal guardian of the above named student hereby give my consent for the student to participate in the event or experience described above. I do so in recognition of the benefits that I believe will come to my child in connection with this event or experience. Accordingly, I assume all risks and hazards incidental to such participation. I agree, on behalf of myself, my child named herein, and our heirs, personal representatives, successors and assigns, to release, protect, hold harmless and defend Notre Dame de la Baie Academy, Inc. (“NDA”) and all persons associated with NDA from (a) any and all claims for damages to my student and/or to his or her property, except to the extent of insurance carried by NDA; and (b) damages or losses to third parties arising out of any intentional activity or any negligent activity of my child, which is alleged to have caused such harm. Persons associated with NDA include its officers, directors, employees, agents, and volunteers (including but not limited to chaperones, leaders, persons transporting the student, and any other person associated with this event). I understand that the risks to my student may include but are not limited to travel related risks, including by way of illustration and not limitation, risks from riding in a motor vehicle, risks associated with the misbehavior of students, weather related risks, and many others. If the event or experience involves travel outside the immediate community, risks may include staying in public hotels, eating at public restaurants, attending public places, other modes of transportation such as motor coach, airplane, boat, or bus and I understand that my student may be associated with or exposed to such risks. I assume full responsibility for those exposures. I agree to hold harmless NDA and all persons associated with NDA, as described above, from any and all claims for damages, causes of action, or possible rights or claims which we or others may have, and from all costs of defending any such claims, including but not limited to reasonable and actual attorneys’ fees and expenses arising in connection therewith, except that I do not hereby release any claims that my child or I may have arising out of intentional or reckless acts of any of the released persons or entities.

MEDICAL MATTERS: I hereby assure that my child is in good health, to the best of my knowledge, and I acknowledge that I have primary responsibility for the health of my child. I have read the school policy on the administration of medication to students. I hereby advise that my student does or does not need to take prescription or non-prescription medication while participating in this event or experience. I acknowledge that if this event or experience involves overnight accommodations and/or travel beyond one school day, I must complete a detailed medical information form and must return it to the group leader before the trip departs.

Signature of Parent/Guardian:

Signature of Student:

 Print Name: _____
 Date: _____

 Print Name: _____
 Date: _____

I wish to participate in the event or experience. I join with my parent/guardian as to all representations, releases, and indemnifications described above.