

Field Trip Release Form

I, the undersigned parent(s) or guardian(s), hereby give my child, _____, who is _____ years of age, permission to attend various field trips with Green Valley Christian School, during the 2009-2010 school year. I certify that my child is able to participate in any and all activities pertaining to any field trips. If my child has a medical condition, which may be relevant to a physician in the event of an emergency, I have listed them below. In the event that an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached within a reasonable period of time, as determined by school officials, or if immediate medical attention is required, I hereby authorize the school or the adult sponsor to make emergency medical decisions for my child. If there are any activities that I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do, for myself and for my child, heirs and assignees, hereby irrevocably and unconditionally release, acquit and forever discharge Green Valley Christian School, Green Valley Christian Center, and its agents, employees, and volunteers from any and all liability, actions causes of _____ actions, claims, expenses, obligations and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child's participation in the described activity or in any other associated activities including, but not limited to, any injury to my child or property, even injury resulting in death.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the state of Nevada and that if any portion hereof is held invalid it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto.

I further state that **I HAVE CAREFULLY READ AND UNDERSTAND THE FORGOING RELEASE AND KNOW THE CONTENTS HEREOF AND I SIGN THE RELEASE AS MY OWN FREE ACT.** I understand that this is a legally binding agreement.

Medical conditions _____

Allergies/Physical restrictions _____

Instructions and Medications _____

I do not wish my child to participate in the following: _____

Telephone numbers where I may be reached in an emergency: _____

Parent/Guardian Signature

Date