

NEEDHAM PUBLIC SCHOOLS

PERMISSION FORM FOR SCHOOL SPONSORED TRIPS AND EVENTS

Please complete and return this form to your child's teacher

Student's Name: _____ has my permission to participate in
the following school sponsored trip/event/athletic season: _____
on _____*. I understand that the mode of transportation to and from this trip/event will be:

School Bus Private Vehicle Other _____

- I understand this trip/event/athletic season is voluntary and attendance by my child is not required.
- I understand that Needham Public Schools will take reasonable precautions for the safety and welfare of all students involved.
- I understand that the Superintendent may cancel any trip/event/athletic practice or contest up until the time of departure for any reason. The Needham Public Schools will not be responsible for making refunds for goods or services not received due to such cancellation, however reasonable efforts to obtain such refunds will be made.
- I have instructed my child to behave in a proper manner at all times so as to reflect credit on his/her parents and school and to act in accordance with directions given by those in charge.
- I agree that my child may be transported by [_____

_____)

(insert all possible drivers) to and/or from the trip/event/athletic practices and contests. I expressly release the Town of Needham, Needham Public Schools, the School Committee and all their employees, agents, volunteers, and any and all individuals assisting in the foregoing activity (the "Releasees") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries or property damage resulting from my child being transported by the above-named individual(s).

- In consideration for my child's participation in the above-described trip/event/athletic season and except in the case of reckless or willful misconduct, I expressly agree to indemnify, defend, and hold harmless from and waive against the Town of Needham, the Needham Public Schools and their employees, agents and assigns, any and all claims for medical expenses, loss of services, injury to person or property, death, loss of consortium or other claims that may occur at, or traveling to or from, or from participation in, the trip/event/athletic practices and/or contests.
- I further consent to emergency treatment by a physician in the event of injury to or illness of my child during his/her participation in the above-described trip/event. I accept full responsibility for all costs for any such emergency treatment.

- If applicable: I give permission for my child to be given the following medication (name and dose):

_____ by the person delegated by the School Nurse.

- Check here if you give permission for your child to drive him/herself.
- Check here if you, or your properly licensed child, will transport students using your private vehicle. If checked, please respond to the following questions:
 - I possess a valid operator’s license and agree to transport students to the aforementioned trip/event using my private vehicle: _____ (Yes/ No/ Not Applicable)
 - I give permission for my child, _____ (enter name), who has been properly licensed for at least six months, to transport other students using my private vehicle: _____ (Yes/ No/ Not Applicable)
 - My vehicle is properly registered, annually inspected and insured to the following minimum limits: \$100,000 per person/ \$300,000 per accident bodily injury coverage; and \$100,000 property damage coverage: _____ (Yes/ No)
 - My vehicle’s capacity does not exceed fourteen passengers, plus a driver: _____ (Yes/ No)
 - I will operate my vehicle safely and will require the use of seat belts by all passengers, including the use of child passenger restraints by children under the age of 8 who measure less than 57 inches in height: _____ (Yes/ No)

I/We have read and understand this Form and sign it voluntarily with full knowledge of its significance.

Parent/Guardian (only one signature required) Parent/Guardian

Date: _____ Date: _____

- * Note that if a fee is required to attend this field trip/event/athletic season:
 - Check here if you are interested in obtaining a scholarship to cover your child’s participation in this event. I understand that this information is confidential.
 - My fee of \$_____ (enter amount) is enclosed. Please make your check payable to Needham Public Schools.

¹ Updated May 23, 2022