



**PROJECT GRADUATION
PARENTAL CONSENT, RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**
In order for your senior to attend project graduation, this form must be signed and returned.



THIS IS A RELEASE OF LIABILITY AND INDEMNITY AGREEMENT. PLEASE READ CAREFULLY BEFORE SIGNING.

The undersigned student, _____, of Falmouth High School (FHS) and the undersigned parent or legal guardian of said student, hereby agrees as follows:

The undersigned parent or legal guardian hereby give(s) permission to the undersigned student to attend Project Graduation, organized by parent volunteers, on the Project Graduation Committee on June 7-8, 2015.

All undersigned individuals (students, parent(s) and legal guardian(s)) understand that Project Graduation is a purely voluntary event, the attendance at which is not required by any FHS student.

The undersigned individuals understand and accept the fact that throughout the evening, the students will be permitted to engage in a variety of recreational activities some of which, by their nature may be activities that have inherent risks.

Students will be chaperoned by teachers and parent volunteers. However, all undersigned individuals agree and accept that neither FHS nor the parent volunteers will be responsible for any injury of any student participating in this event.

All undersigned and individuals agree to abide by the rules of the FHS Project Graduation Committee. Failure to comply with said rules or engage in inappropriate behavior will result in disciplinary action, possibly requiring a parent or legal guardian to pick up the student (perhaps at some distance) from the event.

PROJECT GRADUATION RULES
NO BACKPACKS OR PURSES
NO WATER BOTTLES OR DRINKS OF ANY KIND
NO ALCOHOL
NO DRUGS

UPON RETURNING TO FALMOUTH IN THE MORNING
NO STUDENT WILL BE ALLOWED TO DRIVE HOME
TRANSPORTATION WILL BE BY BUS

ALL UNDERSIGNED HEREBY RELEASE, WAIVE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND HOLD HARMLESS FHS, ITS FACULTY, STAFF AND ADMINISTRATION, AND PARENT VOLUNTEERS, FOR ANY OR ALL LOSS OR DAMAGE AND ANY CLAIM ON ACCOUNT OF INJURY TO THE STUDENT ARISING OUT OF OR RELATED TO THE PROJECT GRADUATION EVENT, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE.

ALL UNDERSIGNED HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND INTEND THEIR SIGNATURES TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

DATED: _____ 2015

DATED: _____ 2015

Parent/Legal Guardian

FHS Student Signature

Home Phone

Cell Phone

Email:

****Please complete the reverse side****

MEDICAL INFORMATION ON THE REVERSE - REQUIRES SIGNATURE

PROJECT GRADUATION - Medical Permissions Policy / Additional Information Necessary:

Students who currently have medical permissions on file with the school nurse may self-carry inhalers and emergency medicines such as an EpiPen. No other medications such as Tylenol or Advil will be allowed in a student's personal bag.

My student will self carry medicines for which he/she has permission for on file with the school nurse.

My student does not have a medical permission on file with the nurse - no medicine of any kind will be brought to the event.

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Food Allergies:

Please check one option:

My student has food allergies: specifically

_____.

My student does not have food allergies.

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To indicate that the information provided is complete – please Check the Box and Sign below:

(Parent / Guardian Signature).