

LAMAR CONSOLIDATED INDEPENDENT SCHOOL DISTRICT
PARENTAL ACKNOWLEDGMENT, RELEASE AND INDEMNIFICATION / FIELD TRIP

Date(s) of Fieldtrip/Program/Activity: _____

Name of Fieldtrip/Program/Activity: _____

Name of Participant: _____

Our child _____ is a student in the Lamar Consolidated ISD and has chosen to participate in a fieldtrip/program/activity offered at or by the Lamar Consolidated ISD.

We acknowledge that this is a voluntary activity and my child is not required to participate in this activity. We understand that Lamar Consolidated ISD will not assume any responsibility in case of an accident, injury or other loss associated with my child's participation in the program/activity listed above and by signing this document we give permission for our child to participate in the program/activity stated above.

We, _____, in exchange for the Lamar Consolidated ISD's agreement to
(parent/guardian)
allow our child to participate in the activity listed above, hereby **RELEASE, ACQUIT, FOREVER DISCHARGE, AND HOLD HARMLESS, the Lamar Consolidated ISD, its Board of Trustees, in their individual and official capacities, and its agents, servants, and employees, in their individual and official capacities, from any and all claims, demands and all causes of action under state or federal law that may arise in connection with our child's participation in the activity stated above. We further agree not to institute any action against the Lamar Consolidated ISD, its trustees, agents and/or employees, in their individual or official capacities, for any cause of action that arises in connection with our child's participation in the activity listed above. We further voluntarily agree to indemnify and hold harmless the Lamar Consolidated ISD, its trustees, agents and/or employees, against any and all losses, costs, damages, liabilities, and expenses, including the costs of investigation and defense of legal actions and reasonable attorneys' fees, arising out of, resulting from, or in any way related to any future assertion by us or our child or any other person or entity claiming through us or our child related to my child's participation in the activity listed above.**

We understand that neither the Lamar Consolidated ISD, its Board of Trustees, nor its agents or employees, are waiving their immunity from liability they now have under Texas law.

We have read and understand the PARENTAL ACKNOWLEDGMENT, RELEASE AND INDEMNIFICATION, and by my/our signature below voluntarily agree to terms set out in this document.

Parent/Guardian Signature

Parent/Guardian Signature

Parent/Guardian Printed Name

Parent/Guardian Printed Name

Date

Date

Special information about my child (such as medical or physical limitations):

Emergency Contacts' Names:

Telephone Numbers:

Lunch Directions

- No lunch is needed for this trip due to the time we will be away from the campus.
- A lunch will be provided as a part of the trip, therefore, your child should not bring a lunch or other food items.
- Students will need to provide their own lunch. Please select one of the two choices below for your child:
 - A sack lunch will be brought from home. (No coolers, lunch kits, Thermoses or plastic containers to be returned home.)
 - Each child should bring a cold drink. The school will provide a cooler for the drinks.
 - A sack lunch will be purchased from the school cafeteria at the regular lunch price.

PLEASE RETURN THE TOP COPY OF THIS FORM TO YOUR CHILD'S TEACHER BY _____