



OFFSITE TRIP PERMISSION AND RELEASE FORM
FY 2024, Valid thru 7/30/24

Student's Name: _____ Date of Birth: _____

Emergency Contact Name/Relationship: _____ Phone: _____

Participation in off campus trips is an important part of the educational experience offered by Temple Isaiah Religious School (the "School"), including its Makom Teen Community. You have voluntarily enrolled the above-named student (the "Child") in the School/ Makom Teen Community and understand that the Child's participation in the Trip (as defined below) is part of the School/ Makom Teen Community experience. The Child will not be permitted to participate in any trips offered by the School/ Makom Teen Community unless this Form is signed by the Child's parents and/or legal guardians (as well as the Child if 18 or older).

I. PARENTAL PERMISSION AND CONSENT TO PARTICIPATE

As a custodial parent or legal guardian of the Child, I give my Child full permission to participate in the off-campus trip and all of the travel, activities and events associated with it, including, but not limited to, transportation by plane, bus, boat, train, and/or private vehicle (including but not limited to a vehicle operated by a parent volunteer, a School/ Makom Teen Community employee, or any other person authorized by the School) as detailed below.

Some, but not all, of the risks that my Child may or will be exposed to on the trip include:

- Participants' mental, physical, or emotional conditions (known or unknown, disclosed or undisclosed);
- Unusual/unknown illnesses;
- Extreme and unpredictable weather conditions;
- Forest fires;
- Unmarked or obscured hazards;
- Falling down or slipping;
- Being in remote locations, away from immediate access to help;
- Dangerous road conditions and transportation problems; and/or
- Animal hazards, such as stings, bites, poisoning, falls and blows.
- Exposure to, contracting, or spreading COVID-19 or other communicable disease.

These and other activities, risks, hazards and dangers can result in (for example):

- Falls, being struck, or colliding with objects or people;

- Experiencing vehicle capsize or collision;
- Injuries due to heat, cold or heavy exertion, including dehydration and overexposure to the sun;
- Property damage or loss;
- Broken bones, wounds, cuts, burns;
- Drowning;
- Becoming lost or disoriented;
- Illness: long or short term, such as gastrointestinal problems;
- Illness or injury from COVID-19 or other communicable disease;
- Mental/emotional trauma; and/or
- Other injury, permanent disability, or death.

By signing this Form, I acknowledge that I have had the opportunity to ask questions and obtain whatever information I require to fully inform myself about the trip. This includes, but is not limited to, reviewing the trip itinerary, schedule of trip activities, and any information available about the trip destination(s) provided by the Center for Disease Control and Prevention, Massachusetts Department of Public Health, and any other applicable state or local public health authorities. I am satisfied as to the adequacy and safety of the arrangements for the trip.

I am also familiar with the mental and physical health of my Child and my Child's ability to travel to unfamiliar places and be exposed to people of different backgrounds. My permission for my Child to participate in the trip is based upon my belief that my Child has the maturity and self-confidence to be able to respond appropriately to any challenges which my Child may encounter during this trip. In addition, to the best of my knowledge, my Child does not have a physical or mental health condition that could affect my Child's ability to safely participate in the trip. If any concerns about my Child arise, I will bring them to the attention of the Director of Congregational Learning, Teen Educator or the Temple Isaiah staff member in charge of the outing, prior to my Child participating in the trip.

II. MEDICAL TREATMENT AUTHORIZATION

In the event of an accident or other emergency, I understand that the School/ Makom Teen Community or its employees or representatives will, to the extent possible, consult with me concerning the reasons for and effects of all care for my Child. Recognizing that it may be difficult to reach me, I hereby authorize the Temple Isaiah Group Leader for the offsite outing to permit commencement of medical treatment or hospital care (including necessary transportation) when, in the professional judgment of the physicians, dentists or other medical personnel involved, such treatment is medically necessary, even if I have not yet been consulted. In authorizing such emergency treatment, I agree to accept the determination of the treating physician, dentist, or other medical personnel that the treatment or care rendered was medically necessary to protect the life, health, or mental well-being of my Child. I agree to bear all costs incurred as a result of such emergency treatment.

IV. PARENTAL RELEASE, ASSUMPTION OF RISK AND INDEMNIFICATION AGREEMENT

In consideration of my Child being permitted to participate in the trip, I acknowledge, understand, and

agree as follows:

RELEASE. I agree, on my own behalf and that of my Child, to forever release, acquit, discharge and covenant to hold harmless the School/ Makom Teen Community, its trustees, employees, volunteers, representatives, and agents, as well as the trustees, employees, volunteers, representatives, and agents of any other educational institution on whose campus the Student participates in the trip ("Releasees") from any and all claims, suits, liabilities, actions and causes of action, including, but not limited to, claims of negligence on the part of Releasees, which I or my Child or our heirs, legal representatives, successors, conservators and assigns may have, now or in the future, which arise directly or indirectly out of my Child's participation in the trip.

I understand that this Release includes, but is not limited to, any and all claims, suits, liabilities, and actions, that may arise directly or indirectly out of: (a) the financial losses that I or my Child may incur in connection with the cancellation or rescheduling of the Overnight Trip; (b) any services related to the special or emergency needs of my Child while on the trip; and/or (c) any authorized administration or assistance in administration of medication(s) to my Child.

ASSUMPTION OF RISK. I fully understand that participation in the trip involves risks and danger of serious bodily injury, including, but not limited to, permanent disability, paralysis, and even death. I recognize that general social and political conditions and circumstances may affect the trip and are outside of the School/ Makom Teen Community's control and have agreed, with knowledge of those conditions and circumstances, to allow my Child to participate in the trip. I knowingly and freely assume all risks, both known and unknown, associated with the trip, including, but not limited to, bodily injuries and damage and loss of property, for myself and my Child.

INDEMNIFICATION. I hereby agree, on my own behalf and on behalf of my Child, to indemnify Releasees from and against any and all claims, suits, actions, causes of action, including, but not limited to, claims of negligence and any other liabilities, including attorneys' fees, by any person resulting directly or indirectly from my Child's participation in the trip, including, but not limited to, injury of any person caused by my Child or for damage to or destruction of any property caused by my Child.

COVENANT NOT TO SUE. I hereby, on my own behalf and on behalf of my Child, covenant not to sue Releasees for any claim covered by the Release provision above. I represent that I have not asserted in any forum any claim described in the Release provision above. I further agree that I will not assert in any forum any of the claims described in the Release provision above. Notwithstanding the generality of this Covenant Not To Sue, the above Release provision and waiver of claims applies to the extent permitted by law. This provision is not intended to, and does not, govern any claims that cannot be released by private agreement.

The release, assumption of risk and indemnity provisions contained above include any property or personal loss or damage, or other loss caused or alleged to be caused, in whole or in part, by the ordinary negligence (but not gross negligence) of Releasees.

I, the undersigned, have read the entirety of this Form and I have satisfied myself that I understand what it means. I hereby expressly agree that the provisions contained in this Form are intended to be as broad

and inclusive as permitted by the laws of the Commonwealth of Massachusetts and that if any portion hereof is held invalid or unenforceable, I agree that the balance shall continue in full legal force and effect. If this Form is signed by only parent or guardian, that individual certifies that he or she has sole legal custody of the Child.

I acknowledge and agree that my electronic signature below has the same legal effect and validity as my written signature and that this Form is valid and will be given the same legal effect as a written and signed Form. I further acknowledge and agree that no certification authority or other third-party verification is necessary to validate my electronic signature, and that the lack of such certification or third-party verification will not in any way affect the enforceability of my electronic signature or this Form. My consent to the electronic signature below applies only to this Form and does not apply to any separate transactions or communications with the School/ Makom Teen Community. I may request a paper copy of my completed and binding Form by printing the completed Form from this online enrollment portal. If I do not want to enter into this Form by providing my electronic signature, I understand that I may perform this transaction in non-electronic form by printing and signing a paper copy of this Form and forwarding it to the School/ Makom Teen Community.

Signature of Parent/Legal Guardian : _____

Print Full Name: _____ Date: _____

Signature of Student If 18 Or Older: _____

Print Full Name: _____ Date: _____

**STUDENT ACKNOWLEDGMENT
(TO BE SIGNED BY STUDENTS OF ALL AGES)**

I agree to fully comply with all applicable laws, rules, and regulations as well as the Temple Isaiah Religious School policies, Kavod Code and protocols while participating in all offsite outings. I understand that my conduct while on the outing may serve as the basis for disciplinary action or expulsion from the School. By signing this Form, I acknowledge that I have read and understand what I am signing, and I am agreeing to all of the provisions to which my parents/legal guardians have agreed above.

Signature of Student: _____

Print Full Name: _____ Date: _____