



**WELLINGTON**  
Collegiate Academy™

## PARENTAL CONSENT AND RELEASE FORM FOR FIELD TRIPS

I \_\_\_\_\_ parent / legal guardian of \_\_\_\_\_  
give permission for my child to participate in WCA's field trip to \_\_\_\_\_  
on \_\_\_\_\_. I understand this activity involves travel.

### Transportation permissions and waiver

I understand that the parent of another student participating in the activity may be used to transport students to and from the activity. Any damages/harm resulting from a parent/guardian/or other designated driver arising from the operation of a motor vehicle in relation to the above listed activity, is hereby waived. Please initial to the left of the below statement to acknowledge your acceptance of the following permission.

\_\_\_\_\_ I give permission for my child to ride in a vehicle driven by a parent of another student to the activity.

### Conduct during activity

I acknowledge that I have spoken with my child about my child's need to comply with Field Trip Rules. Rules are available in the school's website.

### Acknowledge of personal liability and waiver

I understand that this field trip may expose my child to some risks and I assume any such risk that may arise from this trip. I accept full responsibility for all medical expenses for any injuries that might occur to my child by reason of his/her participation.

**By signing this form**, I hereby release Wellington Collegiate Academy, administrators, directors, teachers, employees, agents, and volunteers ("released parties") from and against any and all claims, demands, actions, complaints, suits or other forms of liability that any of them may sustain (a) arising out of my child's failure to comply with Field Trip Rules; (b) arising out of any damage or injury caused by my child; (c) arising out of accidental damage or injury; or, (d) arising out of a parent/guardian/or other, designated driver's operation of a motor vehicle in relation to this activity. I also agree to indemnify and hold harmless the released parties from the released claims, including any and all related costs, attorney fees, liabilities, settlements, and/or judgments.

By signing, I confirm that I have carefully read this CONSENT AND RELEASE and agree to its terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the above child.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian Signature