

SOUHEGAN HIGH SCHOOL
P.O. Box 1152
412 Boston Post Road
Amherst, NH 03031
(603) 673-9940

PARENT PERMISSION & RELEASE FORM

I, _____, am the parent or guardian of
_____, a minor, who desires to participate in the following school
activity: _____

I acknowledge that I have been informed of the activity and the provisions for my child's involvement, and I consent to my child's participation in the above described school activity.

In consideration of the permission granted to my child to participate in the above described activity by Souhegan High School, I release and hold harmless Souhegan High School, its agents, employees, and officers, from any and all actions or causes of action of any nature for personal injury or property damage of any kind arising in any way from my child's participation in the above described activity. I further acknowledge that this release is binding upon my heirs, successors or assigns, that I have read the foregoing and understand its significance, and that I have executed this document voluntarily.

In witness whereof, I have signed this document on the _____ day of _____, 20_____.

Parent or Guardian

Student (if 18 years or older)

Address

Telephone Number

I acknowledge that I have been informed of all expectations of me as included in the SHS Field Trip Policy and agree to abide by these expectations.

Student Signature

Instructions:

1. Please read the entire form. If there is anything about this form or the described activity that you do not understand, do not sign the form until you are satisfied that you have obtained a complete explanation.
2. Fill in all the blanks.
3. If you have more than one child participating, complete one parent permission form per child.