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We, the parents (guardians) of \_\_\_\_\_, would like to give our child the opportunity to participate in the field trips, community outings/vocational experiences, and after school activities that The Education Cooperative is sponsoring and conducting for the benefit, education, and enjoyment of students in the \_\_\_\_\_ program on the following dates: \_\_\_\_\_ to \_\_\_\_\_.

We realize that our child's participation in this program may involve some risk of personal injury to our child. Therefore we, on behalf of our child and ourselves, hereby release The Education Cooperative, members of its Board of Directors, its employees, agents, and contractors from any and all claims and legal actions for any personal injury to our child and for any loss to us that results from our child's participation in this program.

We further agree to indemnify and hold harmless The Education Cooperation, members of its Board of Directors, its employees, agents, and contractors against any and all claims and legal actions for any personal injury to our child and loss to us and any other person and for any personal injury to other persons and damage to other persons property that results from our child's participation in this program.

We give permission for our child to be transported in a TEC or private vehicle operated by the TEC staff as needed to any and all destinations regarding the activities described in the first paragraph. We release The Education Cooperative and its employees, including its board members, teachers, and administrators, from any and all liability, damages, claims, and judgments, of every kind and nature arising out of, or in any way relating to, any injury or death, or for property damage, occurring during, or on account of transportation of our child by the transporting party regarding the/these school activity (ies).

We hereby grant The Education Cooperative, its employees, and agents full authority to take whatever actions they may consider to be warranted under the circumstances regarding the health and safety of our child, and we authorize them to obtain the necessary medical services and treatment for our child, without further consent and at our expense, from a hospital or medical doctor.

We understand that this is a supervised school program and that group standards of conduct must be observed. We will instruct our child to comply at all time with the TEC rules, standards, and instructions for student behavior. We agree that The Education Cooperative, its employees, and agents shall have the right to enforce appropriate standards of conduct and that they may, at any time, terminate our child's participation in this program for failure to behave according to these standards or for any actions or conduct which they consider to be incompatible with the interest of comfort and welfare of other students in the program or its supervisors. If our child's participation is terminated, we consent to his or her being sent home at our expense.

If only one parent has custody or is the legal guardian of the student, only that parent is required to sign below. Otherwise, both parents should sign. If the student is his/her own guardian, it is necessary for him/her to sign below as well.

\_\_\_\_\_  
Mother (signature)      Mother (print name)      Father (signature)      Father (print name)

\_\_\_\_\_  
Student (signature)      Student (print name)

\_\_\_\_\_  
Address      Date