



# Watertown Middle School

68 Waverley Avenue  
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**Jennifer Chen Fein**  
*Principal*

**Susan Carle**  
*Assistant Principal*

**Jennifer Sarmiento**  
*Assistant Principal*

Dear caregiver(s),

Your student is invited to attend the WMS Fall Dance on Friday November 3, 2023 from 6pm-8pm. During the dance, which is a school event, students are expected to dress and behave in a manner consistent with school procedure. The exception we make for dances is that students may use their cell phones. Students are reminded that the privilege of using your cell phone comes with the responsibility of using it appropriately. This includes asking for and receiving consent from classmates before sharing photos or videos on social media.

- All students should enter the dance from Door 7, in the back parking lot, by the big gym. Caregivers should drop off and pick up on Bemis Street.
- Permission slip must be signed and returned in order to purchase a ticket.
- This event costs \$5. Tickets will be sold before school at the Waverley entrance on Tuesdays and Fridays. They will also be sold at the door of the event.
- Drinks and snacks will be sold and will cost between \$1 to \$2 at the event.
- Caregivers who would like to donate packaged snacks or drinks can do so by dropping them off in the main office the week of the event.
- **Caregivers must be available** for contact during the event should an emergency arise.
- No backpacks allowed. All bags and pockets will be subject to search.
- Students are expected to stay for the duration of the event. If students choose to leave early, they will be allowed to do so. Once a student leaves, there is no re-entry.

**\*It is a privilege, not a right, to attend this event. Students who earn an office-level detention during the five school days preceding the event will need an additional signature from their Assistant Principal.**

PARENTAL CONSENT, RELEASE FROM LIABILITY  
AND INDEMNITY AGREEMENT FOR  
WATERTOWN PUBLIC SCHOOL VOLUNTARY FIELD TRIPS

I/We also agree to forever RELEASE the Town, a municipal corporation of the Commonwealth of Massachusetts, and the Public Schools of Watertown, the School Committee, and all their employees, officers, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary field trip programs of the Town or Public Schools ("the Releasees") from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorneys' fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and unknown personal injuries to my child or property damage resulting from my child's participation in the said Town and/or Public Schools' voluntary field trip program which I/we may now or hereafter have as the parent(s) or guardian(s) of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise, to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorneys' fees, arising from personal injuries to my child or property damage resulting from my child's participation in the Town and/or Public Schools of Watertown voluntary field trip program or administration of first aid.

I/We further affirm that I/we have read this Parental Consent, Release from Liability and Indemnity Agreement, and that I/we understand the contents of this Agreement. I/We understand that my child's participation in these programs is voluntary and that my child and I/we are free to choose not to participate in said programs. By signing this Agreement, I/we affirm that I/we have decided to allow my child to participate in the Town and/or Public Schools' field trip program with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I/we may suffer in voluntary Town and/or Public Schools' field trip program.

I agree to the guidelines listed above and I understand my child is free to leave at the conclusion of the dance:

\_\_\_\_\_  
Printed Name of Student/Participant

\_\_\_\_\_  
Signature of Student/Participant

\_\_\_\_\_  
Printed Name of Caregiver of student/participant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone number of Caregiver of student/participant

\_\_\_\_\_  
**\*additional signature from the Assistant Principal if needed**