



Assumption of Risk/Waiver of Claim

The undersigned wishes their child/children to participate in a field trip being sponsored by the Rockingham County Education Foundation (RCEF).

I understand that the field trip involves hiking and/or other activities that can be both strenuous and physically demanding and could result in my child being physically injured. Such injuries could include strained, sprained, or torn muscles, ligaments and tendons, broken bones, head or back injuries, concussions and even loss of life. I understand that this is only a partial list of the injuries my child might receive as the result of engaging in this activity.

I understand that it is important that my child be in good physical condition when engaging in this activity, and I hereby expressly assume the risk of any physical injury or other loss that my child might sustain as the result of participating in this activity.

I also expressly waive and covenant not to sue on any claim I might have against RCEF, or any officer, board member, or employee of RCEF, or any volunteer, or the estate or representatives of such person(s) for any personal injury or loss my child might sustain as the result of engaging in any activity relating to this field trip whether caused by negligence, breach of contract or otherwise.

I understand that photographs may be taken during this field trip. I grant to RCEF, its representatives and employees the right to take photographs of my child. I authorize RCEF, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that RCEF may use such photographs, with or without my name, and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Signature of Parent or Guardian

Date signed _____