**NORTH READING HIGH SCHOOL**

189 Park Street

North Reading, Massachusetts 01864

**Michael Downs**

*Assistant Principal*

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*Principal*

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**NORTH READING HIGH SCHOOL**

**CONSENT AND RELEASE FORM**

I, the undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(parent/guardian) (name of student)

do hereby consent to my child's participation in (please describe the activity in detail):

Thursday, Mar. 22 – leave NRHS by school bus at about 2:15 p.m. to participate in Massachusetts High School Drama Guild one-act play competition at John Hancock Hall in Boston. Students will return to NRHS about 10:30 p.m.

Friday, Mar. 23 – arrive NRHS 7:30am - leave NRHS by school bus at about 8:30am to participate in Massachusetts High School Drama Guild one-act play competition at John Hancock Hall in Boston. Students will return to NRHS about 11:00 p.m.

Saturday, Mar. 24 – students will meet at NRHS at 9am and leave about 1:30 a.m. by school bus. The day’s activities will end approximately 10:45 p.m. in Boston.

I also agree to forever release the North Reading Public Schools, the School Committee, and all their employees, agents, board members, volunteers, and any and all individuals and organizations assisting or participating in voluntary athletic, extracurricular or recreation programs of the North Reading Public Schools ("the Releasees") from any and all claims, rights or action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to my child or property damage resulting from my child's participation in North Reading Public Schools voluntary athletic, extracurricular or recreation programs.

I also promise to indemnify, 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 past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the North Reading Public Schools voluntary athletic, extracurricular or recreation programs.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the North Reading Public Schools athletic, extracurricular or recreation programs with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary North Reading Public Schools athletic, extracurricular or recreation programs.

**Please Complete:** **Signatures:**

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent or Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_