

BRISTOL WARREN REGIONAL SCHOOL DISTRICT  
Bristol, Rhode Island 02809

Off-Campus Program/Trip Consent  
And  
Assumption of Risk Form\*

The undersigned parent or guardian consents to the Student participating in the off-campus program/trip.

The undersigned states that he/she has familiarized himself/herself with the Program/Trip and that the Student has the maturity necessary to participate.

The undersigned acknowledges that participation is off campus and has some risk inherent in it, to include, but not limited to , participation injury, travel and/or carpooling, all of which are acknowledged and assumed.

Medical treatment at my sole expense may be authorized by School Department employees, as my agent.

In consideration of the Student's participation in the Program/Trip, the undersigned agree to hold harmless Bristol Warren Regional School District, its School Committee, its agents, servants, employees, and volunteers (collectively "Supervisor(s)"), from claims arising out of the Student's participation in the Program/Trip and assumption of the risk involved, that do not concern an intentional tort by Supervisor(s) or wanton behavior or gross negligence or reckless disregard by Supervisor(s).