Field Trip Liability Waiver (Volunteer)

FORM **14**

Archdiocese of Washington – Catholic Schools

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| Each adult volunteer, including group leaders and chaperons, must complete and sign this waiver prior to the field trip or co-curricular activity on <<10/17/17>>.  |

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| Acknowledgment and Release of Liability |
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| I, |       | , agree on behalf of myself, my  |
|  | *Print Your Full Name* |  |
| heirs, assigns, executors, and personal representatives, to hold harmless and defend |
| Holy Redeemer School | and | Holy Redeemer |  |
| *Print School Name* |  | *Print Affiliated Parish* |  |
| and the Archdiocese of Washington, its officers, directors, agents, employees, or  |

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| representatives associated with the field trip (co-curricular activity) from any and all  |
| liability claims, loss or damage arising from or in connection with my participation inthe field trip (co-curricular activity) occurring on 10/17/17, at the location of Patuxent Research Refuge.  |
|  I, hereby, acknowledge that all the information contained in this waiver is accurate and truthful. I also confirm that I am in compliance with Archdiocese of Washington Child Protection Policy for Volunteers in Archdiocesan Catholic Schools. |
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| **Full Name of Adult/Volunteer:** |       |
|  | *Please Print* |
| **Signature of Adult/Volunteer:** |  | Date: |       |
|  |  *Sign Your Name* |  | *Today’s Date* |