

## 2009 CAPCO PARENT CONSENT FORM

My son/daughter, \_\_\_\_\_ has my permission to attend the CAPCO After Prom Party at Dave and Buster's in Plymouth Meeting on Saturday, May 9, 2009. I understand he/she will travel by bus from Conestoga High School after the Junior Prom and return to Conestoga High School at approximately 3:30 AM. I further understand that this trip is sponsored and organized by the Conestoga After Prom Celebration Organization ("CAPCO") and not by the Tredyffrin/Easttown School District or Conestoga High School.

### Section I: Parent Permission

My child is required to abide by all Conestoga High School and Tredyffrin/Easttown School District codes of conduct as a condition for participation in this trip. I have discussed this condition with my child and represent that she/he agrees to this condition. Failure to abide by such codes of conduct or all applicable local, state and Federal laws shall be adequate cause for the chaperone to determine that the parent/guardian must pick up their student at Dave and Buster's or the student will be sent home at my personal expense with possible referral to law enforcement authorities.

### Section II: Medical Authorization

I authorize and designate the chaperones to have authority during both the period of travel and at the party to act in our stead to authorize medical treatment, including hospitalization, for my child if deemed necessary by the chaperone. In granting this authorization, I am advising the chaperone that the medical treatment sought should be the best reasonably available and that the cost is to be of secondary concern.

### Section III: Release & Indemnity Agreement

In consideration for CAPCO participation in the planning and arranging of the trip, I, on behalf of myself and my child, agree:

1. To release CAPCO and/or any chaperone(s) from any and all liability for personal injury to my child or damage to the personal property of my child and to indemnify and hold harmless CAPCO and any chaperones(s) for any claims asserted of the nature described in this paragraph.
2. To indemnify and hold harmless CAPCO and any chaperones(s) from any and all liability for any claim or damages asserted against them individually, jointly or severally as a result of any injury to any other person or damage to that person's property resulting from the actions of my child.
3. Liability includes any loss, damage, expense, causes of actions, lawsuits, claims or judgments, including attorney's fees.

Intending to be legally bound, I agree to the terms and conditions set forth in Section I (Parent Permission), Section II (Medical Authorization) and Section III (Release and Indemnity Agreement) above.

If my child is eighteen (18) years of age or over, he/she assents to the Release and Indemnity Agreement contained in Section III above and to abide by all Conestoga High School and T/E School District codes of conduct as a condition for participation in this trip and party as witnessed by his/her signature.

Signed: \_\_\_\_\_

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

Please check: ( ) Mother, ( ) Father, ( ) Guardian

Student Signature: \_\_\_\_\_

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

(If student 18 years of age or older)

Witness Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Please list medications taken by the student \_\_\_\_\_

Health Insurance Provider \_\_\_\_\_ Policy # \_\_\_\_\_ Group # \_\_\_\_\_

**THIS FORM MUST BE COMPLETED BY THE PARENT/GUARDIAN OF EVERY STUDENT ATTENDING THE CAPCO DAVE AND BUSTER'S TRIP AND PARTY, INCLUDING GUESTS.**