



Authorization and Indemnity Release Form

Student Name: _____

Parent/Guardian Name: _____

Parent Phone Number: _____

Activity or Trip: _____

Dates: _____

As the parent/guardian of the above student, I give permission for my student to leave the activity or trip listed above with _____.

I understand that this person will be responsible for notifying the appropriate staff member before leaving with my child.

By signing this agreement, I am releasing Willard School District, as well as any staff members from any claim, or potential liability from the time my student leaves the school group. I attest that if any claim is brought contrary to this release, I will indemnify and hold harmless for any lawsuit, claims, or damages, and from any expenses incurred by the district defending such claim.

Signature of Parent/Guardian

Date

On this ____ day of _____, 20__ personally appeared before me the parent/guardian of _____, who has signed the foregoing Authorization and Indemnity Release form of their own free will and accord with full understanding of the contents.

Notary Public

My Commission Expires: _____