



LEADERSHIP · SERVICE · COMMUNITY · EDUCATION · AWARENESS

**SAFE HARBOR COHASSET COALITION
YOUTH AMBASSADOR PROGRAM ACTIVITIES PERMISSION SLIP
ACADEMIC YEAR 2020-21**

I, _____, declare by signing this form that I am the legal parent/guardian of _____, minor child and student (hereinafter “student”) of the Safe Harbor Cohasset Coalition Youth Ambassador Program and am authorized to grant permission for the activity planned by the program.

I hereby authorize student to participate in off-location field trips and all related activities. Student has my permission to ride in the car of an adult volunteer, driven by that adult.

RELEASE AND HOLD HARMLESS AGREEMENT

I hereby consent to participation by student in the special events planned by the program, I understand that these events will take place away from regular program location and that student will be under the supervision of the designated employees and volunteers on the stated dates. I further consent to the conditions stated above on participation in these events, including the method of transportation.

In consideration of student being allowed to participate in programs and special events, I agree to release and hold harmless the Safe Harbor Cohasset Coalition, any and all affiliated organizations, their employees, agents and representatives, including volunteer and other drivers from any and all claims arising from or relating to student’s participation. This Release and Hold Harmless Agreement does not apply to claims or intentional misconduct or gross negligence.

Print Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date

Please return completed form via email to cohassetyouthambassadors@gmail.com