

FIELD TRIP PERMISSION FORM AND LIABILITY WAIVER

Participant Information:

Participant's Name: _____

(If applicable) Minor's Name: _____

Parent/Guardian Name (if minor): _____

Phone Number: _____

Email Address: _____

Field Trip Details:

Destination: _____

Date of Trip: _____

Departure Time: _____

Return Time: _____

Mode of Transportation: _____

Lodging Location: _____

Permission and Acknowledgment:

I, the undersigned, give permission for myself (or my minor child) to participate in the field trip described above. I understand that participation is voluntary, and that [DIGI2U] will take reasonable precautions to ensure safety. However, I acknowledge that certain risks are inherent in any activity and assume full responsibility for my (or my child's) participation.

Liability Waiver:

I hereby release, waive, and hold harmless [Digi2u], its employees, agents, and affiliates from any and all claims, liabilities, demands, or expenses arising from participation in this field trip. I understand that [Digi2u] is not responsible for any injury, loss, or damage to personal property during the trip.

Medical Authorization (for minors):

In the event of a medical emergency, I authorize [Digi2u] and its representatives to obtain medical treatment for my child. I understand that I am responsible for all medical costs incurred.

Emergency Contact Information:

Name: _____

Relationship: _____

Phone Number: _____

Signature: _____

Date: _____



DIGI2U 501c3 Non-Profit Organization:

641 Shunpike Road Chatham, New Jersey, 07928

Office: 201.374.3553

Email: admin@digigu.org

Website: www.digigu.org