



# The Graham School

encounter the world, engage the mind

## 2016-2017 Parental/Guardian Experiential Consent & Release

As the parent(s)/guardians (s) of \_\_\_\_\_, a \_\_\_\_\_ grade student at The Graham School, I hereby give my authorized consent on his/her behalf to participate in The Graham School Experiential Program on or off The Graham School premises for the 2016-2017 school year. I grant permission for my student to ride on the school bus or COTA bus, or to ride with Graham staff, volunteers, students or Experiential Mentors. On behalf of myself and my son/daughter, I hereby release The Graham School, Experiential Placements, and their divisions, subsidiaries and affiliates, trustees, officers, employees, agents, staff or instructors from and against liability for damages of whatever kind and description including loss of life, personal injury, and property damage which may result, directly or indirectly, from the participation of \_\_\_\_\_ (student) in organized experiential activities. I further agree to be responsible for any property damage caused by the above-mentioned student in connection with his/her participation in the Experiential Program.

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date