



# KEEFE TECH SUMMER DISCOVER CAMP

750 Winter Street • Framingham, MA 01702

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Email: summerdiscover@jpkeefehs.org

## PARENTAL CONSENT, RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT SUMMER DISCOVER CAMP

I/We, the undersigned father, mother or guardian, of \_\_\_\_\_, a minor, does hereby consent  
(Please PRINT child's name legibly)  
to my child's participation in voluntary athletic, trade shop and recreational activities of the **Summer Discover Camp at the Joseph P. Keefe Technical High School** (also the South Middlesex Regional Vocational Technical School District, a regional school district duly established by law and a body politic and corporate of 750 Winter Street, Framingham, Middlesex County, Massachusetts; the "District").

I/We also agree to forever RELEASE the Summer Discover Camp, the District, and its successors, school committee members, departments, officers, employees, volunteers, and agents ("the Releasees") in connection with my child's voluntary participation in the Summer Discover Camp or other programs of the Joseph P. Keefe Regional Vocational Technical School, from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and including reasonable attorney's fees, directly or indirectly from known and unknown personal injuries to my child or property damage resulting from my child's voluntary participation in the Summer Discover Camp at The District which I/We may now or hereafter have as the parent/guardian of said minor child and which said minor child has or hereafter may acquire, either before or after reaching majority.

I/We also promise, to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorneys' fees, arising from personal injuries to my child or property damage resulting from my child's participation in The District's Summer Discover Camp of voluntary athletic, trade shop, recreation programs or administration of first aid.

I/We further affirm that I/we have carefully read this Parental Consent, Release from Liability and Indemnity Agreement, and that I/we understand that my child's participation in Summer Discover Camp is voluntary and I/we are free to choose not to participate in said programs. By signing this Agreement, I/we affirm that I/we have decided to allow my child to participate in The District's Summer Discover Camp with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I/we may suffer in voluntary athletic, trade shop or recreation programs affiliated with the South Middlesex Regional Vocational Technical School District.

Signed:

\_\_\_\_\_  
Parent(s)/Guardian(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student/Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Summer Discover Director

\_\_\_\_\_  
Date

**PLEASE RETURN THIS PAGE WITH CAMP APPLICATION**