JUNETEENTH CELEBRATION
EDUCATIONAL FIELD TRIP

Parental/Guardian Consent Form and Liability Waiver
Ages: Upcoming 5th-8th grade | 40 Seats Available - First Come First Serve
For more information contact Shanika Stringer at: 256-236-8221 and/or sstringer@annistonal.gov

Participant's/Child's Name: _____   Birth Date: _____

Parent/Guardian's Name: _____

Home Address: _____

Work Phone: _____

Home Phone: _____

E-Mail: _____

I (Parent/Guardian) _____ grant permission for my child.
(Child's Name) _____ to participate in this field trip
event that requires transportation. This activity will take place under the guidance and direction of employees and/or volunteers from **City of Anniston** *(Name of Organizer)*.

A brief description of the activity follows:

Type of event: Juneteenth Celebration Educational Field Trip

Location of event: **National Center for Civil and Human Rights** **&** **Birth Home of Martin Luther King, Jr**
100 Ivan Allen Jr Blvd NW, Atlanta, GA 30313   501 Auburn Ave NE, Atlanta, GA 30312

Individual(s) in charge: Shanika Stringer- City of Anniston

Date, Time, & Location of departure: Depart at 7:00 AM CT from Anniston City Meeting Center (1615 Noble St) return at 6:00 PM CT to the Meeting Center

Mode of transportation to and from event: charter bus

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor participant.

I agree on behalf of myself, my child named herein, or our heirs, successors and assigns, to hold harmless and defend the Organizer its officers, directors and agents, and any other representatives associated with the event, from any and all actions, claims, demands, damages, costs, expenses and all consequential damage arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the Organizer, its oficers, directors and agents, or representatives associated with the event for reasonable attorney's fees and expenses arising therewith.

Signature: _____

Date: _____