

Notarized Consent of Both Parents/Guardians for International Trip Gr 7-12

This certifies that our child named below has our permission to participate in the Cincinnati Hills Christian Academy ('School') trip as described below and enter the country listed as well as travel through countries on their route to their destination. We understand that various school instructors and administrators and possibly some parent chaperones will accompany the students.

Destination Country: Monterrey, Mexico **Trip Dates:** October 27 through November 2, 2018
Primary Trip Leader(s) Accompanying Student: Michael and Patricia Fite

School Policies

By signing this form, I/we acknowledge that I/we understand that all rules, policies and regulations of Cincinnati Hills Christian Academy pertaining to student behavior remain in effect for the duration of this trip. Any student found in violation will be subject to appropriate disciplinary measures and may result in the student being sent home on the next available means of transportation at the parents' expense. The school also reserves the right to prohibit a student from participating in a trip as a result of any disciplinary issues that arise prior to the travel dates. Any payments made toward the trip up to that point will not be refunded and parents may be obligated to pay for the trip in full even if their child is prohibited from traveling.

Permission to Transport

Trips by their nature take place off school grounds and thus expose your child to additional potential risks, many of which are outside the control of the School. By signing this form, I/we am giving consent to having my/our child be transported by a CHCA employee, agent or authorized parent volunteer.

Liability Release

While these types of trips can be very rewarding, they do carry additional risks to the trip participants. In some locations, the political situation can change, possibly increasing security risks. The potential for injury or health related problems might also be increased in some countries due to local conditions. Moreover, the lack of technology and other factors may cause temporary delays in communications and transportation.

By my/our signature(s) below, I/we acknowledge that we have been adequately informed, either verbally or in writing, of the potential risks and dangers related to my/our student's participation in the trip. Further, I/we freely give our informed consent for such student to participate in the trip, notwithstanding the potential risks and dangers related thereto.

Further, by signing this form, I/we agree that the School, the School Board, its employees, agents, affiliates and successors will not be held responsible for any damages or injuries to our child's person or property resulting from the negligence, recklessness or willful misconduct of third parties not under the direct control of the School, and that we will not bring any lawsuit or other action against the School, its employees, agents, affiliates or successors seeking compensation for such damages or injuries arising from such events. My/our child's participation in this trip is completely voluntary, and thus if I/we am uncomfortable with the risks associated with this trip, I/we will withhold our permission.

Travel Insurance

For trips valued at \$500 or more, travel insurance is strongly recommended, but not required. The school will not reimburse any expenses paid for the trip and will not pay any additional expenses that may arise due to unforeseen circumstances. It is the responsibility of the parent to pay any of these costs.

Parent/Guardian Medical Statement

I/we hereby state to the best of my/our knowledge, my/our student is in good health and physically and mentally able to participate in travel, including overnight travel. I/we understand that with some trips my student could possibly be exposed to sanitation issues. **I/we also understand that my/our child may have an active, rigorous daily schedule and am stating that they are healthy enough to fully participate without restrictions.**

Agency for Medical Consent

I/we also authorize school-appointed chaperones or such substitute as they may designate as agent for us to consent to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment and hospital care for the student which is deemed advisable by and to be rendered under the general or special supervision of any physician or surgeon, licensed under the Provision of Medicine Practice Act, or of any dentist licensed under the Dental Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or dentist, at a hospital or elsewhere. If emergency transportation is needed, our child may be transported in a privately owned car or commercial vehicle at the family's expense.

Both parents or guardians must sign this form, and it MUST be notarized. If the parents or guardians are not together, parent/guardian consent from both parties is still required. If one parent/guardian is the sole custodial parent/guardian or deceased, there must be legal proof/documentation of this status attached to this form.

The undersigned does hereby grant permission to _____ (Name of minor) to travel with the trip specified above.

Signature of Father: _____ Printed Name: _____

Signature of Mother: _____ Printed Name: _____

STATE OF _____

COUNTY OF _____

ss _____

Wherefore, I, being a notary public, do hereby affirm that _____, did personally appear before me this _____ day of _____, _____ and being duly sworn did sign the foregoing instrument of his/her/their own free act and deed.

Signature of Notary Public

SEAL