Informed Consent

Maria Montessori Academy Mr. Casey's Weightlifting Class

This is an Informed Consent Form for Minors, which identifies risks of participating in the Maria Montessori Academy Field Trips, and a Consent for parents/guardians.

Mr. Casey's weightlifting class will be attending Snap Fitness multiple times during the 2016-2017 school year. Please take a moment to initial the date that you would like your student to attend Snap Fitness. Further information regarding specific fieldtrips will become available as the date draws nearer. If you later decide you do not wish you student to attend class on specific dates, it is your responsibility to inform the school and your student's teacher.
January 18 th , 20 th , 24 th , 26 th , 30 th
February 1 st , 3 rd , 7 th , 9 th , 13 th , 15 th , 17 th , 22 nd , 24 th , 28 th
March 2 nd , 6 th , 8 th , 10 th , 14 th , 16 th , 20 th , 22 nd , 24 th , 28 th , 30 th
April 10 th , 12 th , 14 th , 18 th , 20 th , 24 th , 26 th , 28 th
May 2 nd , 4 th , 8 th , 10 th , 12 th , 16 th , 18 th
Injury may result from a student's participation in this activity, which involves traveling by foot on sidewal along public roadways and intersections. Students are expected to familiarize themselves with the activit and what is required, including rules of conduct for the activity. Students are expected to follow proper operating procedures including safety procedures as outlined by the activity supervisors, plus any directions given by an authorized school employee.
Student Consent
I,, acknowledge that I have familiarized myself with what is required to participate in the activities, will follow the rules of conduct, will follow the operating procedures, and will follow any directions given by an authorized school representative.
(Signature of student) Parental Consent
The undersigned, the legal guardian of (hereinafter "student"), a student at Maria Montessori Academy under eighteen years of age, in consideration of student's participation in each of the school's junior high library days, do hereby agree to this consent.
I recognize that participation in this activity may involve moderate to strenuous physical activity and may cause physical and or emotional harm or distress to participants. There may also be associated health and safety risks, state that the student is free from any known heart, respiratory or other health problems that could prevent student from safely participating in any of the activities.
Consent is expressly given, in the event of injury, for any emergency aid, anesthesia and/or operation, if in the opinion of the attending physician, such treatment is necessary.
I have carefully read and understand the contents of the foregoing language and I specifically intend it to cover student's participation in this activity for each of the scheduled days.
NameDate
Signature(Parent or legal guardian signature)
(Farent of legal guardian signature)