

SUBJECT: ACTIVITIES AUTHORIZATION FORM

1. I/we, as the parent(s)/legal guardian(s) of cadet _____, date of birth _____ (“my Cadet”), hereby permit my Cadet to participate in the OFF campus activities which I have initialed below. I hereby represent that my Cadet has the experience and physical capability to participate in those activities initialed below. My Cadet and I agree to abide by all of the rules and regulations of Massanutten Military Academy (“MMA”) while my Cadet is participating in these OFF campus activities.

2. I have indicated by **initialing** next to each activity, the activities in which my Cadet **MAY** participate. (Note: Not all of these activities may be offered in any given year.) I understand that cadet activities are an additional expense not covered by tuition or fees and agree to pay for the activities in which my Cadet participates.

3. I fully understand that the various OFF campus activities involve risks to my Cadet of serious bodily injury as well as property damage. I also fully understand that there may be other risks to my Cadet arising from his/her travel to and from the OFF campus activities. **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS TO MY CADET, WHETHER KNOWN TO ME OR REASONABLY FORESEEABLE, AND I FULLY ACCEPT AND ASSUME FULL RESPONSIBILITY FOR ALL LOSSES, COSTS OR DAMAGES ARISING FROM OR IN ANY WAY RELATED TO MY CADET’S PARTICIPATION IN THE VARIOUS OFF CAMPUS ACTIVITIES OR HIS/HER TRANSPORTATION TO AND FROM SUCH ACTIVITIES.** All medical expenses not covered by my insurance are my personal responsibility.

4. In acknowledgment of the risks described above, on behalf of myself and my Cadet, I hereby agree to assume all risks of such injury to my Cadet and release, hold harmless, indemnify, and defend MMA, its staff, teachers, chaperones, employees and agents from any and all liability, actions, causes of action, claims, or demands of any kind whatsoever arising from, in connection with, or related to my Cadet’s participation in these activities and transportation to and from such activities. The terms herein shall serve as a release and assumption of risk for the heirs, executors and administrators of myself and my Cadet.

5. I intend this agreement to be a complete and unconditional assumption of risk and release of liability to the extent permitted by law, and agree that if any portion of this agreement is held to be invalid, then the balance shall continue in full force and effect. This agreement is valid and shall remain in effect for the entire period that my cadet remains at MMA. This form may not be modified. I agree that this agreement shall be governed and construed by the laws of the Commonwealth of Virginia, excluding its conflict of laws provisions, regardless of where any injury or loss shall occur.

	<u>Initials</u>		<u>Initials</u>
Snow boarding/skiing	_____	Water parks	_____
Off campus dances	_____	Sleigh rides	_____
Roller skating	_____	Golf	_____
Mall trips	_____	Amusement parks	_____
Movie trips	_____	Plays/musicals	_____
White water rafting	_____	Bowling trips	_____
Sporting events	_____	Fishing	_____
Paint ball	_____	Canoe trips	_____
Hiking/camping	_____	Equestrian activities	_____
Rappelling/rock climbing	_____	Sight seeing trips	_____
Community Service	_____	Reenactment	_____

6. Please sign here to allow your cadet (17 years of age or older) to participate in any MMA endorsed Red Cross blood drive.

Parent/Guardian Signature

Date

I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND ITS TERMS.

Cadet Signature

Date

Parent/Guardian Signature

Date