

**TO BE TRANSLATED INTO THE STUDENT'S HOME LANGUAGE**

**CAMBRIDGE PUBLIC SCHOOLS  
INFORMED CONSENT AND RELEASE FORM TO PARTICIPATE IN WATER ACTIVITIES**

I, the parent/guardian/caregiver of \_\_\_\_\_, hereby give permission for my child, \_\_\_\_\_, to participate in any water activities that are connected or related to the field trip to \_\_\_\_\_ on \_\_\_\_\_ . I understand that water activities include, without limitation, use of a pool, swimming and boating and that such activities may involve physical and athletic participation. I also understand that injuries may occur from the result of participation in such water activities including, without limitation, permanent disability, injury or death. I acknowledge and agree that my child may assume the risk of participating in such water activities and I understand that the Cambridge Public Schools will not accept responsibility for any injuries sustained. Further, I understand that my child will be obliged to abide by the school based rules and the codes of conduct in the Cambridge Public Schools *Rights and Responsibilities Handbook* while on this field trip as well as any rules of conduct promulgated by the organizers and chaperones of the field trip and any rules of conduct set by the facilities or organization where the water activities are located.

By entering into this Informed Consent and Release to Participate in Water Activities and granting the permission as stated herein, I am releasing the City of Cambridge, and the Cambridge Public Schools and their respective officers, directors, agents, employees, members and/or chaperones, from and against any and all liability, loss, damage, costs, claims and/or causes of action arising out or related to my child's participation in any water activities while on this field trip.

I have read this Informed Consent and Release to Participate in Water Activities and understand its terms. I sign it voluntarily and with full knowledge of its significance.

\_\_\_\_\_  
Parent/Guardian/Caregiver Signature

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Parent/Guardian/Caregiver Printed Name

\_\_\_\_\_  
Student Signature (if 14 or older)

\_\_\_\_\_  
Relationship to Student

\_\_\_\_\_  
Date