

Kendall County Special Education Cooperative

201 Garden Street – Yorkville, Illinois 60560

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RELEASE AND IDEMNIFICATION AGREEMENT FOR FIELD TRIP PARTICIPANTS

Permission to attend and participate in the Illinois State Special Olympics in

Name of Event

Dates

I, as the Parent/Guardian give my expressed, written consent to any and all employees and agents of the Kendall County Special Education Cooperative to take my child,

_____ On the field trips (“Field Trip”) listed. The undersigned acknowledges voluntary assumption of the risk of injury, damage or loss, both known and unknown, involved with participating in these Field Trips including transportation to and from the activity, and I/we am/are prepared to solely assume all associated with participation in these Field Trips.

Therefore, in consideration of the permission extended to _____ to participate in these Field Trips (I/we) and (my/our) agents, representatives, assigns, heirs, and successors, hereby release, hold harmless and indemnify the Kendall County Special Education Cooperative, it’s agents representatives, officers, employees, assigns, and successors and its member School Districts, each member of the Board individually, its agents, representative, officers, employees, assigns, and successors from any and all claims, demands, actions, or causes of action, whether developed or undeveloped, known or unknown, past, present, or future, including, but now limited to, any or all damages, costs, personal injuries, including death, disabilities, direct or indirect medical expenses, pain and suffering, and attorney’s fees arising out of or in any way connected with participation in these Field Trips.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____