

<u>2023 – 2024 Off-Campus Waiver Form</u>

"Off Campus" is defined as a grade 8 - 12 Senior School privilege to leave the campus of White Rock Christian Academy (WRCA) during lunch period and study blocks (11/12 only) and NOT during class times, chapel, other assemblies, or times when there is a substitute teacher in class. Be aware that during the student's exercise of the off-campus privilege, the school administration may not know the destination, whereabouts, and/or activity of the student.

Student Agreement

I agree to the following:

- I will be bound by the rules and regulations pertaining to the personal conduct as outlined in the student handbook and subject to disciplinary action for violations.
- I am a representative of the school and will demonstrate our school's purpose values
- I will be respectful and amicable in our interactions beyond our community.
- I will sign in and out whenever leaving the school building.
- I will return to school on time when using this privilege.
- If late, I understand I'll be served a detention.

Violation of these responsibilities may result in the loss of Off Campus privileges.

Student Name	Cell
Student Signature	Date



Parent Agreement – Off Campus Waiver Form

I am permitting my child to go off campus during lunch period (G8 – G12) and study blocks (11/12 only).

I agree to the following:

1) I understand the nature and privilege of leaving campus and the maturity level needed from my child. I believe my child to have such experience, maturity level and capability to leave campus.

2) I fully understand that

(a) Leaving WRCA involves risks and dangers of SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, BLINDNESS, PARALYSIS, AND DEATH (risks);

(b) These risks and dangers may be caused by my child's own actions, or by actions of others participating in the off-campus privilege, of others not associated with WRCA, or the condition in which the activity takes place or the negligence of the release name below;

(c) There may be other risks and social and economic losses either not known to me or not readily foreseeable at this time and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES incurred as a result of my child leaving campus.

3) I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND TO AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS White Rock Christian Academy, their respective administrators, directors, staff, volunteers, employees, other participants, from all liability, claims, demands, part of the negligence of the releases' or otherwise, and further agree that if, despite this release, my child, or anyone on my child's behalf makes a claim against any of the releases' named above, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

I have read this agreement, fully understand its terms, understand that I and my child have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW and agree that if any portion of this agreement is held to be invalid that the balance, notwithstanding, shall continue in full force and effect.

4) I/We have discussed this agreement with my/our child who understands the terms and conditions and acknowledges that while exercising off campus privilege, they are bound by the rules and regulations pertaining to personal conduct as outlined in the student handbook and realize that violations of the aforementioned rules and regulations will be subject to disciplinary action.

Mother or Guardian Name

Signature

Date

Father or Guardian Name

Signature

Date