Release of Liability to Participate in 2019 Summer Field Trips

On ___ ALL DATES ___ the ___ YOUTH PAVILION ___ class will be leaving the Child and Youth Program for a field trip to ___ ALL FIELD TRIPS ___.

(TO BE COMPLETED BY PARENT OR GUARDIAN)

I, the parent or legal guardian of __________________________, age ______ do / do not give my permission for him/her to attend summer field trips and activities with the CYP.

In consideration of the authorized personnel of Lejeune-New River Marine Corps Community Services, Child and Youth Program supervising my child on this field trip, I, the undersigned, do hereby release from liability and hold harmless the United States Government and all of its agencies and departments, to include (but not limited to) the Department of Defense and the Department of the Navy, for death or injury to my dependent child during field trips. I do hereby release and hold harmless the United States Marine Corps and all subordinate units and commands thereof, to include (but not limited to) U.S. Marine Forces Command; Marine Corps Installations East; Marine Corps Base Camp Lejeune; Marine Corps Air Station New River; Marine Corps Community Services; Second Marine Expeditionary Force; Second Marine Division; Second Marine Logistics Group; and Marine & Family Services. Finally, I agree to release from liability and hold harmless all commanders, officers, supervisors, military service members, employees and other agents of the United States Government or any subdivision thereof, and promise not to prosecute any of the aforementioned persons or their agents or representatives, successors or assigns in either their official or personal capacities.

I understand that by signing this document I am waiving all rights and claims for damages, demands, and any other actions stemming from any loss, damage or injury my child may incur as a result of participation in CYP field trips, to include the rights that might be asserted by my child, guardians, executors, administrators, legal representatives, successors, heirs, assigns, and all other responsible parties acting on our behalf.

I understand that any incident of neglect, abuse, or injury that is reported to Child and Youth Program as a result of participation in this field trip will be investigated. Any Child and Youth Program employee found to be negligent in his/her assigned responsibilities and duties during this activity will be held accountable in accordance with applicable Federal law and regulations.

__________________________  __________________________  _____________
Printed Name of Parent/Guardian  Parent/Guardian Signature  Date

__________________________  __________________________  _____________
Printed Name of Witness  Signature of Witness  Date