



Hold Harmless Form

New Orleans Adventist Academy

Statistical Information

Name _____
First Middle Last

Please print your legal name exactly as it should appear on permanent records.

Primary Address _____
Street Address / P. O. Box / Apartment # City State Zip Country

Parent's Cell Phone (____) _____ - _____ Student's Cell Phone (____) _____ - _____

Date _____ Grade _____ Teacher _____

Parent Authorization

This agreement is for parents and guardians who authorize their student to travel with New Orleans Adventist Academy for any and all field trips and special events.

Dear Parents:

Your student will participate in various field trip excursions with New Orleans Adventist Academy. Signing this document gives consent for your child to travel with all NOAA Faculty and Staff or any specified field trip specific volunteer.

I release New Orleans Adventist Academy of any responsibility for verifying any driver's license restrictions or the vehicle insurance of a personal / leased vehicle, New Orleans Adventist Academy Faculty, Staff, Volunteer, or any other driver(s) with whom our Student is authorized to travel. I further agree to release, indemnify, and hold harmless New Orleans Adventist Academy, its Board, officers, employees, agents, volunteers, and Southwest Region Conference of Seventh-day Adventist from and against any and all claims and/or damages, including costs and attorneys' fees, related in any way to all travel, excursion, activities, or events, including, without limitation, any personal injury to any participant. I have carefully reviewed this Parent Authorization and Hold Harmless Agreement for Student Travel to and from this activity, know and understand its contents, and recognize that I am completely releasing New Orleans Adventist Academy and all affiliations of any possible liability for the Student's participation, and sign it of my own free will.

Parent Signature

Student's Name (Printed) _____
Last First Middle

Parent's Name (Printed) _____
Last First Middle

Parent's Signature _____
Legal Name Date