

KADIMA AT THE FARM  
STUDENT CONTRACT AND PARENTAL PERMISSION

PLEASE RETURN TO THE CHIZUK AMUNO EDUCATION OFFICE BY SUNDAY, OCTOBER 23, 2016

STUDENT CONTRACT

As a participant on the Kadima At The Farm, I understand that I must abide by all of the rules of the program. I agree to follow all aspects of the schedule, and to adhere to the standards set by the Chizuk Amuno and Kadima Staff.

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Signature of child

Date

PARENTAL PERMISSION

My child \_\_\_\_\_ has permission to attend the Chizuk Amuno Kadima At The Farm Program (including the use of bus transportation) on Sunday, October 30, 2016. There will be continuous adult supervision throughout the trip. The policy of Chizuk Amuno is like that of the public/private schools in that it does not assume liability for accidents or injury incurred during the trip. I understand that although participation in the trip may result in injury, disability or death, I release Chizuk Amuno and its board members, trustees, administrators, employees, and chaperones, for any and all liability for injuries sustained by my child as a result of such participation, including liability for negligence (but not from liability arising from its gross negligence or intentional wrong acts). Chizuk Amuno will take all precautions to safeguard the safety and well-being of its students.

I understand that my child is obliged to conform to the rules of the program, and to participate in all aspects of program's schedule.

In case of medical emergency, I (the parent) of \_\_\_\_\_ give permission to hospitalize, secure proper treatment for, and to order injections, anesthesia or surgery for my child, as named above, after all efforts have first been made to contact me.

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Emergency Contact Name and Phone #

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Parent's Signature

Date