



## SIGNATURE PAGES

### FOR STUDENTS AND PARENT(S) / GUARDIAN(S)

#### Student Information

**First Name:** \_\_\_\_\_ **Middle Initial:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Below, please check the boxes that apply, sign all pages, as well as the page for the 2020-2021 SY, and return all pages to the school.**

#### 2020-2021 LIABILITY RELEASE FORM

##### An Act Relative to Sex Education

A. I acknowledge that I have read the information concerning Parent Notification of An Act Relative to Sex Education M.G.L. Ch. 71 §32A.

YES

NO

B. My child may participate in any portion of the health and/or science curriculum that primarily involves sexual education or human sexuality issues.

YES (Unrestricted)

NO (Restricted)

##### Information Released to a Third-Party Mailing Service

My child's name and address may be released to receive Charter Public School recruitment information.

YES (Unrestricted)

NO (Restricted)

**Pictures/Student Work in the Media**

My child's picture or schoolwork may be taken for the media or used in school district publications including yearbook pictures submitted to the newspaper.

- YES (Unrestricted)
  - NO (Restricted)
- 

**Directory Information Notice**

The school district may release my child's directory information to publish items such as yearbooks, graduation announcements, newsletters, and honor roll announcements without having to get written consent for each use of student information.

- YES (Unrestricted)
  - NO (Restricted)
- 

**Student Technology Acceptable Use Policy**

I have read, understand, and agree to abide by the provisions of the Acceptable Use Policy.

- YES
  - NO
- 

**Student Handbook**

I acknowledge that I have read and have discussed the preceding rules and regulations of this STUDENT HANDBOOK with my child.

- YES
  - NO
- 

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Plymouth Public Schools

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Administration and Instruction

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Assistant Superintendent  
Human Resources

GARY L. COSTIN, R.S.B.A.  
School Business Administrator

## Liability Release Form ~ 2020-2021

**As a result of a recent school district insurance review, our insurance carrier has recommended that all participants in school sponsored activities that occur outside of the regular classroom have a signed waiver on file. *Students will be unable to participate in such activities if a signed Liability Release Form is not on file.***

I, the undersigned \_\_\_\_\_ of \_\_\_\_\_, my child or ward,  
Parent, guardian, etc. Student's name (first and last)  
a minor, do hereby consent to my child's participation in voluntary athletic or recreation programs, field trips, or school sponsored activities of the Town or Public School of Plymouth.

I also agree to forever release the Town or Public School of Plymouth, the School Committee, and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in voluntary athletic or recreation programs, field trips, or school sponsored activities of the Town or Public Schools ("the Releasees") from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries including, but not limited to, death, illness, injury and/or disease, and including any death, illness, injury and/or disease in any way related to or arising out of the novel coronavirus (COVID-19), to my child or property damage resulting from my child's participation in the Town or Public School of Plymouth voluntary athletic or recreation programs, field trips, or school sponsored activities.

I also promise, to indemnify, defend, and hold harmless the Releasees against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the Town or Public School of Plymouth voluntary athletic or recreation programs, field trips, or school sponsored activities.

I further affirm that I have read this Consent and Release Form and that I understand the contents of this Form. I understand that my child's participation in these programs is voluntary and that my child and I are free to choose not to participate in said programs. By signing this Form, I affirm that I have decided to allow my child to participate in the Town or Public School's athletic or recreation programs, field trips, or school sponsored activities with full knowledge that the Releasees will not be liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town or Public School athletic or recreation programs, field trips, or school sponsored activities.

Parent Signature: \_\_\_\_\_

Parent Printed Name: \_\_\_\_\_  
(Please print)

Parent or Guardian of: \_\_\_\_\_  
(Please print)

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Date: \_\_\_\_\_