

100 BLACK MEN OF AMERICA, INC
Triangle East Chapter
PARENTAL CONSENT
TRIPS OR EVENTS

DESTINATION/NATURE OF ACTIVITY

DATE(S) OF TRIP

FORM OF TRANSPORTATION

NAME OF SUPERVISOR/

NAME OF CHILD

NAME OF PARENT/GUARUDIAN _____

100 Black Men of America, Inc. does not carry an accident insurance policy to help cover the cost of accidental injuries to any child on a 100 Black Men of America, Inc. sponsored trip or event.

I certify that I am the parent or legal guardian of the child named above. I have read the above statements regarding accident insurance and/ or liability coverage on 100 Black Men of America, Inc. or its representative to seek, authorize and grant consent to any qualified health care personnel to provide all necessary or appropriate medical treatment to the child for any illness or injury. 100 Black Men of America, Inc. and its representatives are released from any and all claims and causes of action that may arise out of such actions.

I understand that any accident/incident related expenses, including but not limited to, all costs of medical attention and treatment incurred, except for that covered by other applicable insurance, will be my responsibility. I consent to my child's participation in this activity.

I acknowledge, understand, and assume all risk inherent in the trip or event described above, including bodily injury, partial or total disability, death, and damages which may arise from there. These risks and dangers may be cause by the negligence of the participant or negligence of others, including members of 100 Black Men of America, Inc., its agents, members and assignees. It is further acknowledged that there may be risks and dangers not known to me or that are not reasonably foreseeable at this time.

It is the purpose of this agreement to exempt, waive and relieve 100 Black Men of America, Inc. from liability for personal injury, property damage, and/or wrongful death caused by the negligence, if any, of 100 Black Men of America, Inc., its agents, members or assignees.

I acknowledge that I have read the above agreement and have not relied upon any other representations made by 100 Black Men of America, Inc., its agents, members or assignees.

(Signature of Parent/Guardian)

(Date)