



MILLTOWN SCHOOL DISTRICT

Milltown, New Jersey 08850 - 1643

www.milltownps.org



William G. Veit
Principal, Joyce Kilmer School

Stephanie Brown, Ed.D.
Superintendent of Schools

Eric Siegel
Principal, Parkview School

JOYCE KILMER SCHOOL

HAUNTED RIVER WALK PARENT EVENT WAIVER

Student Name: _____

I understand that my consent to the following provisions is necessary for approval of my child's registration for the Haunted River Walk. I understand that refusing consent to any part of the following provisions disqualifies my child from participating in the Haunted River Walk. I understand that participation is voluntary.

I UNDERSTAND THAT THERE ARE INHERENT RISKS ASSOCIATED WITH SAFETY AND SECURITY DUE TO THE VENUE AND SCHEDULE OF THE HAUNTED RIVER WALK AND I HEREBY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR ANY INJURY OR ACCIDENT WHICH MAY OCCUR DURING MY OR MY CHILD'S PARTICIPATION IN THIS EVENT OR WHILE ON THE PREMISES OF THIS EVENT (BOTH BEFORE AND AFTER THE EVENT); AND I HEREBY RELEASE AND HOLD HARMLESS NOT TO FILE SUIT AGAINST MILLTOWN PUBLIC SCHOOLS, ITS ADMINISTRATION, STAFF, VOLUNTEERS, REPRESENTATIVES AND ANY AFFILIATED INDIVIDUALS, ANY EVENT SPONSORS AND ALL OTHER PERSONS OR ENTITIES ASSOCIATED WITH THIS EVENT, INCLUDING BUT NOT LIMITED TO ALL CITY AND STATE GOVERNMENTS, FROM ANY LOSS, LIABILITY OR CLAIMS I MAY HAVE ARISING OUT OF MY OR MY CHILD'S PARTICIPATION IN THIS EVENT (BOTH BEFORE AND AFTER THE EVENT) INCLUDING PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SAME BE CAUSED BY FALLS, CONTACT WITH PARTICIPANTS, INTRUDERS, CONDITIONS OF THE PATH, NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

All students must be accompanied by an adult chaperone to participate in the Haunted River Walk. One parent or guardian must be present as an active chaperone on at least 2 nights of the event. If a parent/guardian is unable to attend the remaining nights, the parent/guardian must arrange for another adult to act as his/her proxy to be responsible for chaperoning the child. A proxy may not be responsible to chaperone more than 2 students. The parent/guardian or proxy must accompany the child each night in order to enter the event.

CONSENT

I give permission for my child to participate in the Haunted River Walk event according to the provisions outlined above.

Parent/Guardian Printed Name

Proxy Name, if applicable

Parent/Guardian Signature

Proxy Signature, if applicable

Attendance Dates (2 nights minimum):

Proxy Attendance Date, if applicable:



Joyce Kilmer School

Eighth Grade Haunted River Walk

Volunteer Contract

As a volunteer for Haunted River Walk you are an important member of our team and act as a representative of Joyce Kilmer School to the community at large. For a better understanding of what you can expect as a volunteer and what is expected of you by Milltown Public Schools we ask you to read, sign and return the following Volunteer Contract.

Joyce Kilmer School asks that you:

- Supervise your given students at all times.
- Attend important meetings.
- Follow guidelines and supervise the Haunted River Walk skit that your students are participating in.
- Do not smoke or drink while supervising the students.
- Do not leave the premises while supervising students unless with permission from a chair parent, teacher, or administrator.
- Follow all guidelines pertaining to the Haunted River Walk.
- Use the proper Chain of Command to report any incidents and report any behavioral concerns immediately.

I agree that any written or verbal information that has been disclosed to me as "Confidential" during my volunteer time will remain in the strictest confidence. I agree that I have read the above statements and agree with them. I will adhere to all confidential requirements contained in this agreement or as otherwise directed to me in writing by the Milltown Public Schools.

Name: _____ Date: _____

Signature: _____