



**City of New York  
Parks & Recreation**  
Michael R. Bloomberg, Mayor  
Adrian Benepe, Commissioner

**City of New York  
Parks & Recreation  
Urban Park Rangers**  
Sara B. Hobel, Director



## SAVE HARMLESS AGREEMENT

### Field Trip

Name of Student: \_\_\_\_\_

Location of Trip: \_\_\_\_\_

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

Students will meet at \_\_\_\_\_ at \_\_\_\_\_,

and return to \_\_\_\_\_ at \_\_\_\_\_.

Activities during the program:

For more information, please contact \_\_\_\_\_ at ( ) \_\_\_\_\_

In consideration for my child's participation in this field trip sponsored by the Urban Park Rangers, I do hereby acknowledge, consent and agree to the following terms and conditions. I declare and represent that he/she is now in good health, that I understand the nature of the activities, and that his/her personal attire and equipment are safe and fit for their participation in those activities.

I further agree to release, indemnify and hold harmless the City of New York: the New York City Parks Department, the Urban Park Rangers and any of the officers, agents, contractors, consultants, servants, and employees: owner, landlord and occupier of the premises in which the activities are being conducted and any of the demands and causes action arising out of related to any loss, damage or injury, including death, that may be sustained while participating in those activities or resulting from such participation however caused and whether by negligence or otherwise. I also certify that my child may, in the sole discretion of the Urban Park Rangers of the City of New York be dismissed for any reason whatsoever, including but specifically not limited to, unacceptable behavior or health reasons.

I hereby grant full permission to any and all forgoing parties to use any photographs, videotapes, motion pictures, recordings and any other record of these activities for any legitimate purpose and waive all future claims to be compensated for such use.

This release shall be binding upon my heirs, next of kin, distributes, executors and administrators. I acknowledge and represent that I have read this release, understand it and sign it voluntarily and that I am authorized to sign this release on behalf of any parent or guardian

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

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_