

JROTC ORIENTATION VISIT RELEASE FORM

We hereby request that our student _____
_____ be permitted to take part in the
orientation visit to _____. The trip is
sponsored by the NROTC/MCJROTC and sanctioned by
_____. The group
will leave _____ on
_____ and return to _____
_____ on _____.

If our request is granted, we unqualifiedly assume full responsibility for any acts of misconduct or negligence committed by our student in connection with the aforementioned trip which may result in damage, destruction, or harm to any property or injury or death to any person or persons. Notwithstanding the misconduct or negligence of my student, I agree to release the U. S. Government and the U. S. Marine Corps from responsibility and liability for any injury, death, or damage to property belonging to my student, which results from his/her participation in NROTC/MCJROTC events.

This request is made with the knowledge that our student will take part in various activities which may include, but are not limited to: orientation flights on Government aircraft; visits aboard naval vessels; participation in familiarization firing of individual weapons; transportation in waterborne landing craft, tracked vehicles, etc., and physically demanding events such as obstacle and confidence courses.

To the best of our knowledge, our child has no physical ailments or medical conditions which would preclude participation in such aforementioned activities. We also certify that we have sufficient medical insurance coverage to pay for any medical treatment, should an injury occur.

Signature of Parent(s) or Legal Guardian(s)

Date

Home Address

Telephone Number

School Official's Signature (Principal, MCJROTC Instructor)

TEACHER NOTIFICATION: The teachers' signatures on the reverse of this form signify that the above student is performing satisfactorily in his/her academic studies at this time and his/her absence from classes will not significantly hinder performance in the course.

TEACHERS:

SCHOOL NOTIFICATION: The signatures below signify that the above student is performing satisfactorily in his/her academic studies at this time and his /her absence from classes will not significantly hinder performance in his/her classes.

DATE

School Sponsor's Signature

Print Name (School Sponsor)

Principal's Signature

Print Name (Principal)