TEANECK PUBLIC SCHOOLS
OPEN LUNCH PERIOD
PERMISSION SLIP AND INDEMNIFICATION AGREEMENT

I, _____, am the parent or legal guardian of
(Print Name of Parent or Legal Guardian)
_____hereinafter referred to as ("my child") who is
(Print Name of Pupil)

currently an **11th or 12th** grade student enrolled in Teaneck High School.
(circle one)

I hereby authorize the Teaneck Board of Education and its appropriate administrators to allow my child to leave the building and grounds of his/her school during his/her assigned lunch period every day during the **2019/2020** school year. I am aware that my child will be excluded from open lunch if he/she is unable to follow the Board's policy, regulations and rules of the open lunch or violates the student handbook or student discipline policy. I understand that my child will be subject to appropriate consequences.

I understand that I am responsible for my child and his/her actions when he/she leaves the school building and/or school grounds. I understand and accept that neither the Teaneck Board of Education nor its members, agents, servants or employees will in any way monitor and/or control my child's whereabouts or safety, or be responsible for my child's acts or omissions, while my child is away from his/her school building and school grounds. In support of this authorization, I provide the indemnification agreement set forth below.

Indemnification Agreement:

I hereby agree to defend, indemnify and hold harmless the Teaneck Board of Education and/or its members, agents, servants or employees or other representatives from any and all liabilities, claims, physical injury, bodily injury, damages, losses and expenses, including reasonable attorneys' fees, that may arise out of and/or in connections with my child's department from his/her high school building and or school grounds in connection with my child's open lunch period. This indemnification agreement's scope of coverage shall include, but not limited to, bodily injuries suffered by my child, other students, Board employees and/or any other persons.

_____ _____
Parent/Guardian Signature Date

**********

Student Permission Slip

I have read, understand and agree to the rules governing the open lunch period privileges and the consequences for violating the Board policy and regulations of the program. I also realize that the program is a privilege that can and will be taken away if I fail to follow Board policy and regulations, or fail to comply with other school expectations, or violate the school discipline policy. I am subject to appropriate consequences as a result of my behavior.

_____ _____
Student's Signature Date