

February 15, 2018

Dear Parents and Guardians,

As a part of the 2018 Riverside School music experience, students in Mrs. Mayer's, Miss Myers', and Mrs. Waldenmaier's classes will attend an Elizabeth G. Schneider Discovery Concert "Peter and the Wolf" by the Richmond Symphony on Thursday, March 15, at 9:45 a.m. This is a full-orchestra performance correlated with Virginia Standards of Learning, and will take place in the Carpenter Theater at the Dominion Arts Center. "Students will learn about instruments and the families of instruments in the orchestra by studying Prokofiev's *Peter and the Wolf*." Travel to the concert this year will be by chartered bus.

- There is no additional charge for this event.
- With teaching social appropriateness, we ask that students dress for the concert in their personal best. We request no jeans and collared shirts are preferred.
- Please read and sign the accompanying "Parental/Guardian Consent and Release Form for Field Trips," and return to the school by Thursday, March 1.

This is a wonderful opportunity for furthering our students' music education and appreciation.

Sincerely,

Christine Bachmann

Christine Bachmann cbachmann@riversideschool.org





PARENTAL/GUARDIAN CONSENT AND RELEASE FORM FOR FIELD TRIPS

My child,	, has permission to participate in the school-	
sponsored activity listed below. I ur	nderstand that this event will take place away from the school	
grounds and will require transportation to the location. I also understand that this activity does /		
does not involve staying overnight and will take place under the guidance and supervision of employees from Riverside School.		
A brief description of the activity follows:		
Name of Event: Richmond Sy	mphony Discovery Concert	
Destination: Carpenter Theater at the Dominion Arts Center		
Date and Time of Departure:	Thursday, March 15 – 8:45 a.m.	
Designated Supervisor of Activity:	Mrs. Bachmann, Mrs. Mayer, Miss Myers, Mrs. Waldenmaier	
Date and Anticipated Time of Return: March 15 – 11:30 a.m.		
Method of Transportation:	Chartered Bus	
Student Cost:	No additional cost	

CONDUCT DURING ACTIVITY

I understand that my child's participation in the activity is a privilege, and not a right. I acknowledge that I have spoken with my child about my child's need to comply with the specific rules and requirements established for this activity; all Riverside School policies and procedures; rules of conduct set forth in the Student Code of Conduct; and state and federal regulations and laws. I understand that all Riverside School rules and policies apply to my child and the other students during the course of the field trip.

TRANSPORTATION PERMISSION AND WAIVER

I also understand that private drivers, a teacher, an administrator, or the parent of another student participating in the activity, may be used to transport students to and from the activity. The owner of the vehicle must carry bodily injury insurance. Riverside School's insurance does not cover damages arising from, or related to, the operation of any private vehicle, failure to follow the directed driving route, or any personal negligence related to this activity. Any damages/harm resulting from a parent/guardian/or other designated driver, arising from the operation of a motor vehicle in relation to the above listed activity, is hereby waived.

Please initial on the space to the left of the statement below to acknowledge your accept the following permission.	otance of
I give permission for my child to ride in a vehicle driven by a teacher, an admir transportation service, or parent of another student to the activity. I also understhave the ability to refuse to sign this Form. In addition, that if I refuse to sign, rewill not be permitted to participate in the activity.	tand that I
MEDICAL TREATMENT PERMISSION AND WAIVER	
I also understand that this field trip may expose my child to some risks and I assume arrisk that may arise there from. I accept full responsibility for all medical expenses for injuries that might occur to my child by reason of his/her participation.	•
Please initial on the space to the left of the statement below to acknowledge your accept the following permission.	otance of
I give permission to authorized personnel to carry out emergency diagnostic a therapeutic procedures as may be necessary for my child, and also permit such procedures to be carried out at and by a local hospital for my child in the even emergency. I understand that any medical expenses will be billed directly to r insurance company.	treatment of an
ACKNOWLEDGEMENT OF PERSONAL LIABILITY AND WAIVER	
By signing this form, however, I hereby release Riverside School, its Board of Direct Board members, administrators, directors, teachers, employees, agents, assignees, and from and against any and all claims, demands, actions, complaints, suits or other forms liability that any of them may sustain (a) arising out of my child's failure to comply wistate, and federal laws and District policies, procedures, and the Code of Conduct; (b) of any damage or injury caused by my child; (c) arising out of a parent/guardian/or oth designated driver's operation of a motor vehicle in relation to this activity; or (d) injury might occur as a result of participation in the field trip activities. I also agree to indem hold harmless the released parties from the released claims, including any and all related attorney fees, liabilities, settlements, and/or judgments.	volunteers s of th local, arising out er y which nify and
SIGNATURE	
I confirm that I have carefully read this CONSENT AND RELEASE and agree to its to knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the have signed this CONSENT AND RELEASE this day of This consent and release has been read and is understood by me. Each parent / guardian with legal custody of the student is required to sign.	
Parent / Guardian Signature Parent / Guardian Signature	