



JCC Rockland J-Teens Trips

I _____ give permission for my child _____ to attend and participate in the trip(s) listed below. I hereby release the JCC Rockland, their agents, employees, management, contractors, and trip venues from any and all damage, liability, or injury in connection with the use of their programs and facilities and any of the programs and facilities contained therein and off-site, not relating to negligence. I hereby personally assume liability for loss, all items, and personal properties.

Week	Date	Location	Initials
8	8/16/22	<u>Breakpoint Bowling</u> 40 S Rte 9W, West Haverstraw, NY, 10993	
8	8/17/22	<u>Sky Zone</u> 33 Lecount Pl, New Rochelle, NY, 10801	
8	8/18/22	<u>High Exposure</u> 266 Union St, Northvale, NJ, 07647	

Parent/Guardian Signature: _____

Date: _____