



Senior Open Campus Student/Parent Agreement

I, (student) _____, have read, understand, and agree to comply with the terms and conditions of CVCA's Senior Open Campus Policy. Furthermore, I acknowledge that while exercising my open campus privilege, I am to follow all procedures and rules as outlined in the CVCA Parent/Student Handbook. Any violation of the policy or CVCA rules or regulations will result in the immediate loss of the open campus privilege and other senior privileges and will subject the student to disciplinary action.

WAIVER OF LIABILITY: By signing this agreement, the student and parents agree to release CVCA from any and all liability arising from the student's actions during his or her exercise of the Open Campus Privilege.

PARENT: By signing this form, I consent to my child exercising the Open Campus Privilege, including leaving campus for his/her lunch, provided he/she has lunch adjacent to study hall and utilizes a vehicle we provided him/her. I do not authorize my child to drive any other CVCA student off campus, and I affirm that I told my child not to transport any other person while exercising the Open Campus Privilege. I fully understand, acknowledge, and agree that CVCA will not provide supervision and is not legally responsible for the actions or omissions of my child and other seniors exercising the Open Campus Privilege whether on or off campus. I agree to indemnify and hold harmless CVCA for any damage to property or person caused by my child in exercising his/her Open Campus Privilege.

Furthermore, I agree that should my child violate any Student/Parent Handbook rules or procedures, Senior Open Campus Privilege Policy requirements, or act inappropriately towards others or the community, or engage in inappropriate or illegal conduct while exercising the Open Campus Privilege, that the administration will revoke this privilege and institute appropriate disciplinary and other school-related consequences.

We have read, understand, and agree to the terms and conditions of the Open Campus Privilege Policy and grant our permission for the above-named student's participation therein.

(Student) _____ (Date) _____

(Parent/Guardian) _____ (Date) _____

This form must be submitted to the Main Office prior to Open Campus Privilege and approved by the Administration. Parents will receive an email from the Main Office to confirm the request for these special privileges.

Date received: _____ Reviewed by: _____ Approved // Denied (circle one)