



# American Embassy School

Chandragupta Marg  
Chanakyapuri  
New Delhi 110021  
INDIA

+91 11 2688 8854 • +91 11 2687 3320 [fax] • www.aes.ac.in • aesindia@aes.ac.in • f @

## Waiver Statement & Student Details for Middle School WOW

I fully approve of my son or daughter's participation in the annual WOW program. I understand that travel within India is often uncertain and may be dangerous due to a number of factors beyond the control of the school. I also understand that medical facilities in rural India may not be immediately available and, if they are, they may not have comprehensive services.

Although each WOW will be closely supervised by faculty members and other responsible adults, I will not hold the American Embassy School, its officers, staff, trip chaperones, medical chaperones, recreation providers or any designated supervisor responsible for any injury, accident or damaging incident (which is not the result of gross negligence or willful misconduct of any employee or agent of the school) that may befall my son or daughter.

Also, I accept full and complete responsibility for any debts that my son or daughter may incur and I agree to pay, upon demand, any transportation costs that may accrue if he or she must be returned to New Delhi as a result of disciplinary action. Transportation costs resulting from medical evacuation will be covered within the limits of the school's travel insurance policy. I will accept the transportation costs if medical evacuation is necessary as a result of inappropriate behavior on the part of my child.

Student name

\_\_\_\_\_  
Parent name

\_\_\_\_\_  
Parent signature

- Please turn over this page to verify passport, visa, medical, and other details are correct
- Please **complete and RETURN** this form to Ms Rekha Nigam, **MS Office - Ext - 3307** by **5:00pm on Wednesday, September 19.**

*Enter to learn. Leave to serve.*

**aes**

The American Embassy School provides a balanced education defined by a **joyful pursuit of excellence** in academics, athletics, arts and service. We enable each student to be an **inspired lifelong learner** and a **responsible, compassionate global citizen.**

## STUDENT INFORMATION FOR WOW

### Student Details

Name on passport		Grade		Gender	
Date of birth		Nationality			

**Please ensure that the Powerschool has current information. The following details are required for participation on this trip**

Parent Name and Contact Details	Emergency Contact Names and Details
Passport number/Place & Date of Issue/Expiry Date	Visa number/Place & Date of Issue/Expiry Date

### Medical & Health Update

Does the child suffer from motion sickness?	<b>CIRCLE: Yes No</b>
New health alert or health alert update/change:	<b>(If medication is required, please include it in the medical list below.)</b>
Medication/Food Allergies:	

### Immunization Record updates

Date of last tetanus immunization			
Date of anti-rabies immunization (optional)	Dose 1:	Dose 2:	Dose 3:

**List below the medications that will be taken on the trip**

Name of medicine	Dose	Time/s to be given	Other Instructions

~~Cross out any medication you do not to be given to your child by the trip medic~~

Acetaminophen for headache, fever or minor discomfort (other names for this are Tylenol, Panadol, Paracetamol, Crocin)	Topical ointments or solutions for minor wounds, skin irritations, and insect bites/stings
Strepsil throat lozenges for mild sore throat	Ibuprofen for menstrual cramps, headaches
Avomine for motion sickness	Avil antihistamine for allergic reactions
Cough lozenges for cough	Digene for heartburn and stomach acidity
Loperamide (Immodium) for extreme diarrhea	

*\*Medications not crossed out indicates permission for the medic to administer without contacting the parent*

### **Information for Students Taking Medications on the Trip**

*Students who take medication must bring enough for the whole trip plus two extra days. Medication should be in the original container, labeled clearly with student's name, medication name, dose and time(s). Medicine and all instructions need to be directly handed to the trip nurse or doctor on the morning of departure. In the event of a medical emergency, every effort will be made to notify parents/guardians as soon as possible.*

**I verify that the following information in Powerschool is updated and current:**

- **Passport and current visa (scanned copy is uploaded)**
- **Parent contact details**
- **Emergency contact names and details**

**I have read the details regarding Health, Safety, Insurance, and Student Participation**

\_\_\_\_\_  
**Parent signature**

\_\_\_\_\_  
**Student signature**

\_\_\_\_\_  
**Date**