

## ACE CENTRAL FLORIDA FIELD TRIP

Sunbridge K-8 School

Address: 3175 Voyager Avenue  
St. Cloud, Florida 34771

Please be sure to fill out the  
appropriate release (attached).



## ACE MENTOR PROGRAM

ARCHITECTURE ▪ CONSTRUCTION ▪ ENGINEERING

# REAL WORLD EXPERIENCE.

What to Wear: Long pants  
Shirts with sleeves  
Closed-toe shoes

We will provide: Hard hats  
Safety Glasses  
Safety Vests



# RIGHT NOW.

# GENERAL RELEASE – MINOR VISITORS



## SAFETY FORM

To: **Gilbane** Date: | |  
Job No: Job Name: Sunbridge K-8  
Job Location: 3175 Voyager Avenue, St. Cloud, FL 34771  
Minor's Name: \_\_\_\_\_

In consideration of permission granted to \_\_\_\_\_ [Minor's Name], a minor for whom I am the parent or legal guardian, to enter and inspect the above-described job location in connection with the OSHA Student Learning Program, I, \_\_\_\_\_ [Name], herewith agree for myself, for \_\_\_\_\_ [Minor's Name], and for our heirs, executors and administrators that, to the fullest extent permitted by law, we hereby release and forever discharge **Gilbane Building Company**, and its affiliates, subsidiaries, officers, directors, agents, employees, representatives and \_\_\_\_\_ [Owner Name], and the contractors or subcontractors who may be performing work on the said premises from all manner of claims, actions or causes of action which I (we) now have or which I (we) or my (our) heirs, executors or administrators hereafter can, shall or may have because of bodily injury or damage to property that \_\_\_\_\_ [Minor's Name] may suffer while on said premises or during or in connection with any transportation provided to me (us) to, from or on said premises by **Gilbane Building Company**, whether the said injury or damage may be due to the act or negligence of **Gilbane Building Company**, and its affiliates, subsidiaries, officers, directors, agents, employees, representatives or of \_\_\_\_\_ [Owner Name] or of any contractor and subcontractor or otherwise. It is understood that I (we) accept full responsibility for the above-mentioned risks.

IN WITNESS WHEREOF, I (we) have hereunto set my (our) hand this \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Printed Parent/Guardian Name

\_\_\_\_\_  
Printed Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Signature

# GENERAL RELEASE - VISITORS



## SAFETY FORM

To: **Gilbane** Date: [ ]

Job No: \_\_\_\_\_ Job Name: Sunbridge K-8

Job Location: 3175 Voyager Avenue, St. Cloud, Florida 34771

In consideration of permission granted to the undersigned (or his or her parent or legal guardian) to enter and inspect the premises as described above, which permission is given as a courtesy to me (us) and for my (our) benefit only. I (we) herewith agree for myself (ourselves), and my child and for my (our) heirs, executors and administrators that I (we) will, to the full extent permitted by law, and do release and forever discharge **Gilbane Building Company**, and its affiliates, subsidiaries, officers, directors, agents, employees, representatives

and/or School District of Osceola County

and/or the contractors or subcontractors who may be performing work on the said premises from all manner of claims, actions or causes of action which I (we) now have or which I (we) or my (our) heirs, executors or administrators hereafter can, shall or may have because of bodily injury or damage to property which I (we) may suffer while on said premises or during or in connection with any transportation provided to me (us) to, from or on said premises by **Gilbane Building Company**, whether the said injury or damage may be due to the act or negligence of the said **Gilbane Building Company**, and its affiliates, subsidiaries, officers, directors, agents, employees, representatives

or of School District of Osceola County

or of any contractor and subcontractor or otherwise. It is understood that I (we) accept full responsibility for the above-mentioned risks.

IN WITNESS WHEREOF, I (we) have hereunto set my (our) hand this \_\_\_\_ of \_\_\_\_\_ 20 \_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____