



# 2018 FCSS History Day Student Permission Slip

(Student's name) \_\_\_\_\_ from (school) \_\_\_\_\_ has my permission to participate in the Fresno County History Day Competition on **Saturday, March 10, 2018** at Fresno Pacific University. We have reviewed and understand the rules of the competition.

### Covenant Not to Sue/Authorization for Medical Care

In accordance with Education Code §35330, I, the undersigned, hereby INDEMNIFY, DEFEND, RELEASE, DISCHARGE and HOLD HARMLESS the County of Fresno, Fresno Pacific University, the Fresno County Superintendent of Schools (FCSS), the Fresno County Board of Education, and their officers, employees and agents from all liability, including injury, death, or other damages, occurring in the course of or while traveling to or from the above named activity which my child may suffer or cause another person to suffer arising out of, or in connection with, or resulting from my child's participation in the above named activity. The undersigned acknowledges that the competition addressed by this release is completely VOLUNTARY.

I agree to have my child receive any emergency medical services deemed necessary by the authorities in charge. It is understood that the resulting expenses will be the responsibility of the parent/guardian.

### Health or Special Needs. Check as apply.

- My child has NO special needs the staff should be made aware of.
- My child has a special need and instructions are attached.
- Other: \_\_\_\_\_

### Media Release

As a participant in the 2018 History Day, I, the undersigned, hereby give consent or do not give consent to FCSS or any other entity approved by FCSS, to take photographs, motion pictures, digital images, sound recordings, and/or DVD/video tapes ("recordings") of my child, singly or in a group at FCSS-related activities, and to use any contest submissions (such as journalism) for the purpose of informing other students, teachers, parents, and the general public of the aims and activities or methods of instruction of the FCSS program and services and for reproduction for promotional or illustrative purposes. I understand that these items may be shown to local and national audiences, in local newspapers as well as national publications, and may be posted on the Internet. It is further agreed that neither my child nor I shall have any right, title or interest in the above named recordings, nor shall there arise in the child or me any cause of action for damages, or injury supposedly resulting from the taking, publication, or dissemination of these recordings or contest submissions for the purpose herein described. It is agreed that I may inspect or review these recordings upon request. I understand that the above activities will not result in any profit, and that I will not receive any monetary compensation. Permission is granted to make alterations and to use my child's name or a fictitious name in editorial works or advertising.

**I, THE UNDERSIGNED, HAVE READ, UNDERSTAND AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT** and further agree that no oral representations, statements, or inducements apart from this written agreement have been made. I understand that by signing this form, I may be waiving valuable legal rights.

Parent/Guardian Name (please print) \_\_\_\_\_

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

Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell \_\_\_\_\_

If I cannot be reached in case of emergency, please notify:

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_ Cell \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_ Phone Number \_\_\_\_\_

*Due to FCSS by February 9, 2018*