PARENTAL/GUARDIAN CONSENT AND RELEASE AGREEMENT

Student	Emergency Contact
Name:	Name:
DOB:	Relationship:
Address:	Home Phone:
	Cell Phone:
	Other:
School:	
Grade:	

PROGRAM: Rassias Youth Language Program (YLP) April 6 – 7, 2019

Acknowledgement of Risk and Agreement: I consent to my child's participation in this program. I understand that attending a program involves some risks, including the possibility of damage to child's property or serious injury to my child. I agree, on behalf of myself and my child, to assume all risks in connection with my child's participation in the program. I agree that my child will follow relevant Rassias Center/Dartmouth directions, rules, and policies and will obey directions. I acknowledge that Rassias Center/Dartmouth has the right to remove my child from participation in the program.

Health and Safety: I confirm that I have consulted a physician, as appropriate, about my child engaging in physical activity, and, if my child's physical health is questionable, that I obtained a medical clearance from a licensed medical professional. I also understand that I am responsible for my child's medical expenses, including deductibles, co-pays, and transportation.

Release of Liability: I agree to release The Rassias Center/Dartmouth College, its trustees, officers, employees, volunteers, members, and representatives from any and all liabilities and claims whatsoever arising out of, or in connection with, my child's attendance and participation in the program, even those that may have been caused by the ordinary negligence of Dartmouth College.

Media Release: The Rassias Center/Dartmouth College may take and use images, film, video, and audio recordings of my child, and take and use quotes or statements from my child, during the activity, without compensation. I release all claims against The Rassias Center/ Dartmouth College with respect to privacy, copyright ownership, and publication, related to the use of quotes, images, or recordings.

Acknowledgement: By reading and signing this legally binding document, I know I am voluntarily waving the right to sue The Rassias Center/Dartmouth College if my child is injured while participating in this program. In the event of my incapacity or death, this agreement binds my heirs, executors, administrators, and representatives.

Signed this the	day of	, 20

Signature of Parent/Guardian:_____

Printed name of Parent/Guardian:_____