

IOWA STATE UNIVERSITY OF SCIENCE AND TECHNOLOGY

College of Engineering and Iowa Alpha Chapter of Tau Beta Pi – Building the Future Youth Program

Participation Agreement, Parental Permission Agreement, Assumption of Risk and Release of Liability and Emergency Medical Information

PLEASE READ THIS AGREEMENT CAREFULLY. This Agreement must be read and signed by every participant as well as the parent or guardian of each participant under 18 years of age. It is a legal contract and affects any rights you/your child may have if your child is injured or otherwise suffers damages while participating in the Building the Future youth program.

PROGRAM DESCRIPTION

The College of Engineering and Iowa Alpha Chapter of Tau Beta Pi Engineering Honor Society K-12 Educational Outreach Program at Iowa State University is hosting Building the Future youth program for middle school students who are interested in experiencing hands-on engineering activities. This event will be held on Iowa State University campus on November 14, 2019 from 9:00 a.m. – 1:30 p.m.. Activities are based around a scenario of a tornado hitting a small town and what engineers can do to help. Students perform 4 different activities all specially designed to introduce them to various types of engineering. The concluding session focuses on what students learned about from what engineers do within their professions. Teachers and chaperones from respective schools are responsible for supervising students at all times.

PARTICIPANT INFORMATION

Table with 4 columns: Participant's Name, Permanent Address, City, State, Zip, Participant's Age, Date of Birth, Home Phone.

TRANSPORTATION

- My child will be provided transportation from the _____ school district.
Other transportation arrangement (Explain): _____

IMAGE/VOICE PERMISSION

Photographs or video/audio recordings may be taken of your child during Building the Future activities. Unless you request otherwise, this Participation Agreement will be considered permission for Iowa State University and Building the Future staff to photograph, film, audio/video tape, record and/or televise your image and/or voice or the image and/or voice of your child for use in any publications or promotional materials, in any medium now known or developed in the future without any restrictions.

BEHAVIOR EXPECTATIONS OF THE PARTICIPANT (TO BE READ AND SIGNED BY PARTICIPANT)

It is important to follow the directions of the program leader(s) at all times. I understand that, as a participant, I have the responsibility to help make the activity a safe experience for everyone through my behavior and conduct. I also understand the danger of not following rules and directions and agree to follow them.

Participant Signature

Date

MEDICAL EMERGENCY CONTACT INFORMATION

Person to Contact:

Name _____

Relation to Participant _____

Daytime Phone () _____

Evening Phone () _____

MEDICAL EMERGENCY PARENTAL/GUARDIAN PERMISSION

I understand and agree that my child (Participant named above) is sufficiently healthy and reasonably fit to safely participate in the Building the Future Youth Program. I understand and agree to inform program leader(s) of any condition that may affect my child’s ability to safely participate in the Program, and to work with program leader(s) to develop a written safety plan regarding my student if I have such concerns.

I recognize that there may be occasions where my child may be in need of first aid or emergency medical or dental treatment as a result of an accident, illness, or other health condition or injury. Therefore, I authorize Iowa State University staff, representatives, and volunteers to provide routine first aid and to seek emergency medical treatment for my child, including consenting to x-rays, examinations, and other medical diagnoses and treatments. I agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries to my child that may occur during their participation in the Program. As parent or legal guardian of my minor child, I am authorized to consent to the services to be rendered and I represent that my consent to and agreement to pay for medical and/or hospital care or treatment is legally sufficient and that no consent from any other person is required. In addition, I agree to hold harmless and agree to indemnify the State of Iowa, the Board of Regents for the State of Iowa, the University, and their staff, representatives, and volunteers from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment.

INSURANCE INFORMATION: ISU does not provide health insurance for participants in this event/activity.

- Yes The above-named participant is covered by health insurance. If yes, please provide the following information for use in the event that treatment is necessary.
- No **If no**, initial this line stating that you do not have health insurance and are aware that Iowa State University does not carry any health insurance for you. _____

ASSUMPTION OF RISK AND RELEASE OF LIABILITY (Please read carefully.)

I give permission for _____ to participate in Building the Future event at Iowa State University.

I understand that the Building the Future event may involve certain risks of physical activity and possible injury and that Iowa State University will provide each participant with reasonable care, but that ISU cannot guarantee that my child will remain free of injury. I nonetheless wish to have my child participate in the activities and ASSUME the RISK of participating. I agree to RELEASE from LIABILITY, INDEMNIFY and HOLD HARMLESS the College of Engineering; Iowa Alpha Chapter of Tau Beat Pi; Iowa State University; State of Iowa; Board of Regents - State of Iowa; and their officers, employees and agents (hereinafter the RELEASEES) from any and all claim and/or cause of action arising out of and related to any injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child’s participation in the Building the Future event. This release, however, is not intended to release the above-mentioned RELEASEES from liability arising out of their sole negligence. I hereby further agree that this Agreement shall be construed in accordance with the laws of the State of Iowa.

Date

Parent/Guardian Name (please print)

Signature of Parent or Guardian

This agreement needs to be received by the “Building the Future” program leaders upon check-in the day of the event or may be scanned and e-mailed to tbp-projects@iastate.edu