

# AgDiscovery 2019

## PARENTAL RELEASE FORM

I certify that my child, \_\_\_\_\_, who is enrolled with this agreement, may participate in strenuous physical activities associated with the AgDiscovery Summer Program. I agree to defend, indemnify, and hold harmless USDA-APHIS and the selected university, its officers, servants, agents, and/or employees, contractors, and insurers from any and all claims for injuries sustained by my child during his/her participation in this program.

Permission is granted in the agreement for my child to receive emergency medical treatment, if needed, and I certify there are no limits to my child's participation in the AgDiscovery activities, except as stated in writing, and included with the medical history.

I understand and acknowledge that AgDiscovery does not offer any medical insurance to protect against injuries, makes no claims to do so, and has no responsibility for any medical expenses incurred. I understand that each participant must assume the risk and any related financial responsibility that could result from participation in any of these activities. I agree to assume any risk and financial responsibility.

I further understand that USDA-APHIS assumes no liability for costs incurred by the families of AgDiscovery participants for travel or other expenses, in the event which unforeseen circumstances occur.

I have received a copy of the Student Contract, and I have reviewed it with my child.

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PICTURE AND VIDEO RELEASE STATEMENT

As parent/guardian of \_\_\_\_\_, I fully understand the conditions stipulated above, and hereby give full consent to USDA-APHIS and the selected university to reproduce my child's picture and/or video in future promotional material. Permission is hereby granted to the U.S. Department of Agriculture and \_\_\_\_\_ University to use pictures and video(s) of my child in any promotional materials, as well as to travel on field trips both in and out-of-state.

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION MUST BE RECEIVED/POSTMARKED BY MARCH 15, 2019**