



Girl Scout Engineering Saturday CONSENT, RELEASE, AND WAIVER FORM



_____, has my permission to attend the Girl Scout Engineering Saturday (GSES) Program, sponsored by the Women in Engineering (WIE) Program at the University of Maryland, College Park on **Saturday, October 8th, 2016 from 10:00 a.m. to 2:30 p.m.**

I agree that she is in good health and may participate in the GSES program. I also agree that she will not attend this event if she should become ill or exposed to a contagious disease.

I understand that participants must be signed-in and signed-out by a parent/guardian, or other adult for which the parent/guardian has granted written authority. I also understand that I am invited back at 2:00 pm for a brief closing ceremony. If I do not attend the closing ceremony, I understand that I, or an authorized adult, will need to sign-out my daughter in person by 2:30 pm; otherwise I will pay a child-sitting fee of \$10 per half hour.

I understand that neither GSES nor any of its representatives can be held responsible for my child once they are under the supervision of an individual I have authorized listed below. For the safety of the participant, GSES representatives may ask the individual listed below to verify their identity by showing an official picture ID (drivers license, ID card, current passport, etc.) prior to releasing the participant.

I consent and give permission to the University of Maryland to photograph my child in connection with GSES activities. I understand that any such photographs, and all rights associated with them, will belong solely and exclusively to the University, which shall have the absolute right to copyright, duplicate, reproduce, alter, display, distribute, and/or publish them in any manner, for any purpose, and in any form including, but not limited to, print, electronic, video, and/or Internet.

I voluntarily waive any and all rights with respect to any such photographs, including compensation, copyright, and privacy rights and any right to inspect or approve such photographs and/or copy, print or other materials that may be used in connection with them. I hereby release and discharge, and agree to hold harmless, the University, its officers, agents and employees, and all persons acting under it permission or authority, from any claims and liability in connection with such photographs and/or their use.

I HAVE READ AND FULLY UNDERSTAND THE CONTENTS OF THIS CONSENT, WAIVER, AND RELEASE FORM AND I SIGN IT FREELY AND VOLUNTARILY.

Parent/Guardian Name (please print)

Date

Parent/Guardian Signature

Parent/Guardian Phone # on October 8, 2016

Additional contact and phone in case of emergency