Youth Environmental Summit (YES!)

Parent/Guardian Permission Form

**All youth participants must complete and return this form by October 18, 2019.**

Scan and email to lauren.traister@uvm.edu or mail to:
YES, c/o UVM Extension, 29 Sunset Drive #2, Morrisville, VT 05661

PLEASE PRINT CLEARLY and COMPLETE ALL SECTIONS

Child’s Name: ___________________________________________________________

Parent/Guardian Name: ___________________________________________________

I give permission for my child to attend the YES on November 1, 2019 ☐Yes ☐No

and for my child to be photographed while at YES ☐Yes ☐No

I, as parent/guardian with legal responsibility for this participant, give permission for my child to participate in the UVM 4-H Program. I understand that participation may involve certain risks of physical activity and that UVM will provide each participant with due care, but that UVM cannot insure that the participant will remain free of injury. I nonetheless wish to have the participant participate in the UVM 4-H Program and voluntarily assume full responsibility for any risks of loss, property damage or personal injury that may be sustained by the participant, or any loss or damage to property owned by the participant, as a result of participating in the UVM 4-H Program. I, for myself, my heirs, assigns and next of kin, agree to: (i) covenant not to sue UVM and its trustees, employees or agents and indemnify and hold harmless UVM, and its trustees, employees and agents from any and all losses, penalties, damages, settlements, costs or other expenses or liabilities arising out of the participant’s participation in the UVM 4-H Program; and (ii) release, waive, and discharge UVM and its trustees, employees and agents, from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage or injury that may be sustained by the participant, or to any property or belongings of the participant, while participating in the UVM 4-H Program. This release, however, is not intended to release UVM from causes of action arising out of the sole negligence of UVM, its trustees, employees or agents. UVM reserves the right to dismiss a participant if in their view, the participant poses a significant safety risk to himself/herself and/or others. I have read this Release of Liability, fully understand its terms, understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.

To the best of my knowledge, my child is in good health and can participate in this activity. I have indicated below any reasonable accommodations needed to meet my child’s mobility, vision, hearing, or other needs.

Parent/Guardian Signature: ___________________________________________ Date: _________

Please tell us of any accommodations your child may require (hearing, vision, mobility, other....)

__________________________________________________________

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