Reset Form

Print Form

U.S. DEPARTMENT OF ENERGY
2012 NATIONAL SCIENCE BOWL®

PARENTAL CONSENT / MEDIA RELEASE FOR STUDENT PARTICIPATION

School_____

I, (Mr., Mrs., Ms.) _____, the parent or legal guardian, as appropriate, of _____, give my consent for him/her to participate in all activities associated with the Department of Energy 2012 Regional and/or National Science Bowl® competitions.

I understand that this will include participation in special events and activities related to the Department of Energy 2012 Regional and/or National Science Bowl® competitions, and will include travel under the supervision of the team coach.

To promote, evaluate, or otherwise describe the Department of Energy's training and educational programs and activities, I give permission to the Department, and its agents, to use in connection with any publication (including but not limited to brochures, booklets, videotapes, reports, press releases, websites, including social media, and exhibits) any image or recording in which my child, a minor, appears, to use and cite any comment(s), verbal or written, made by said minor about the program, and to use said minor's name in connection with any publication and in such manner as determined by the Department.

I hereby release and discharge the Department of Energy and the United States Government, their officers, agents, servants, and employees, and persons, firms, or corporations contracting with, or acting on behalf of, the Department of Energy or the United States Government with respect to all activities associated with the Department of Energy 2012 Regional and/or National Science Bowl® competitions, as well as their heirs, executors, administrators, successors, or assigns, from any cause of action of any nature whatsoever arising from my child's participation in any and all activities associated with the Department of Energy 2012 Regional and/or National Science Bowl® competitions.

_____
(Print Name of Parent or Legal Guardian)

_____ Date _____
(Signature of Parent or Legal Guardian in Ink)

Witness: _____ Date _____
(this form must be witnessed)

NOTE: Team members 18 or older may sign this form.

NO FAX COPIES