Science Olympiad Wayne-Monroe Regional Tournament Parent/Guardian Permission Form

My student is part of the Science Olympiad team and plans to participate in the upcoming Science Olympiad Region 8 Tournament, on Saturday, March 2, 2024 at Wayne State University.

Please initial each of the following:

PERMISSION \_\_\_\_\_\_ I grant permission for my student to participate in this Science Olympiad event.

VIDEO & RECORDING \_\_\_\_\_\_ I understand that my student’s work may be recorded and reviewed by Science Olympiad volunteers and personnel, and not shared outside that cohort. I also understand that my student’s name and image may be used in video ceremonies, the Parade of States video, or to announce results or winners associated with the Science Olympiad event, which may be posted on public websites. Please read the standard Video/Photo/Audio Consent language below.

IMAGE CONSENT \_\_\_\_\_\_ I consent to the use by Science Olympiad, Inc. of my/my student’s image, voice, or both, in (1) any video, photograph, or audio recording; and (2) any video, photograph, or audio recording reproduced either in whole or in part from the video, photograph or audio recording; regardless of whether these materials are used for advertising, publicity, or any other purpose on behalf of either Science Olympiad or its university hosts, sponsors, chapters or partners. I warrant that I have the full right and authority to grant this consent. In addition, I waive all claims to compensation or damages based on the use of my/my student’s image or voice, or both, by Science Olympiad or its sponsors, chapters or partners. I also waive any right to inspect or approve the finished photograph or video or audio recording. I understand that this consent is perpetual, that I may not revoke it.

CODE OF ETHICS & ACADEMIC INTEGRITY \_\_\_\_\_\_ My student and I have read and will abide by Science Olympiad’s stated Code of Conduct, Code of Ethics, Student and Parent Pledges and will follow all direction given by my school in its Student Handbook regulating behavior and academic integrity while representing my school.

COVID-19 AGREEMENT \_\_\_\_\_\_ If health department, district and school regulations allow gatherings, and your student joins others for a Science Olympiad purpose on the school site, you certify that you understand the following statement: “Your child’s school has put in place preventative measures to prevent and mitigate the spread of coronavirus (COVID-19), however, by attending this Science Olympiad event, your child’s risk of contracting coronavirus (COVID19) may increase. By entering the school, you voluntarily assume all risks and hereby release, indemnify, and hold harmless the school, Science Olympiad, Inc., or any of their respective employees, agents, successors, and assigns (“Released Parties”) singularly and collectively, from and against any blame and liability for any injury, harm, loss, inconvenience, or any other damage of any kind connected to your participation in this Science Olympiad event.”

Printed Name of Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Parent/Guardian Date

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Parent/Guardian Printed Name

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Parent/Guardian Cell Phone

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