

Parental consent form

Student name

Student's school name

Emergency contact name

Emergency contact phone

Career technical student organization

- Business Professionals of America
- □ DECA
- □ Family, Career, and Community Leaders of America
- 🗆 FFA
- □ SkillsUSA
- Technology Student Association

I give the above-named attendee permission to attend the state-approved event.

My student agrees to abide by all rules and safety precautions. I am aware that during these events certain risks are inherent. I understand that these events may involve certain conditions, hazards and potential dangers including those associated with traveling or those associated with the facilities or property where the events will occur or whether the dangers are open and obvious or concealed. Any questions which have occurred to me have been answered to my satisfaction.

I hereby grant the Idaho Division of Career Technical Education (IDCTE) and its representatives the irrevocable and unrestricted right to use and publish my image and video captured of me in its promotional materials and publicity efforts. I understand that the photographs and video may be used in publications, print ads, directmail pieces, electronic media (e.g., videos, social media or websites) or other promotion forms.) I hereby release and discharge IDCTE, its offices, employees, agents and designees, and the photographer/videographer from liability for any violation of any personal or proprietary right I may have in connection with such use.

I authorize IDCTE to send my student a post-event survey for feedback and evaluation purposes.

By signing below, I hereby release and agree to hold harmless IDCTE, Idaho BPA, Idaho DECA, Idaho FCCLA, Idaho HOSA, Idaho SkillsUSA, and Idaho TSA from any and all liability, claims or demands for personal injury, sickness or death, as well as property damages and expenses, of any nature whatsoever which may be incurred while my student is participating in the conference.

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I am 18 years of age or older.

I am under 18 years of age. If checked, please have a parent or guardian complete the following:

Parent/legal guardian signature

Phone

Date