



PRECIOUS ME INC.

PARENT/GUARDIAN CONSENT AND LIABILITY RELEASE FORM

Basic Information

Student Name: _____

Last

First

MI

Birthdate: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Parent(s)/Guardian's Name(s):

Parent(s)/Guardian's Home Phone(s):

Parent(s)/Guardian's Cell Phone(s):

Parent(s)/Guardian's Work Phone(s):

Emergency Contact Information

1. Name: _____ Daytime Phone: _____

Relationship: _____ Evening Phone: _____

2. Name: _____ Daytime Phone: _____

Relationship: _____ Evening Phone: _____

Medical Information

Primary Physician Name: _____

Phone: _____



Allergies (including medications student can NOT take):

Special Health Concerns:

Medical Care Authorization

As the parent(s) or guardian adult(s) of _____ (student's name), I/we give permission for **Precious Me Inc.**, and its agents, staff, and volunteers to obtain emergency medical care for my/our child, and I/we authorize health care providers to render such care as may be necessary. It is understood that reasonable efforts will be made to contact me/us prior to obtaining such care, but I/we authorize such care whether I/we are contacted or not, and I/we agree to be financially responsible for such care.

Parent/Guardian Signature

Parent/Guardian Signature

Medical Insurance Company:

Policy/Group Number:

Participant I.D. Number:

Medical Insurance Phone Number:

Will you be able to help with transportation of your participant to Precious Me Inc., sponsored events?
Yes or No

On a scale of 1 to 5 (1 being the least and 5 being the most) how involved will you be in this program?
UNINVOLVED 1 2 3 4 5 VERY INVOLVED

Please write here why you think your teen would benefit from the program and list anything of interest, i.e. special needs or concerns:



WAIVER

RELEASE OF LIABILITY, WAIVER OF LEGAL RIGHTS AND ASSUMPTION OF RISK

In consideration of being allowed, to participate in *mentoring/enrichment* activities sponsored by **Precious Me Inc.** and assumption of risk and to the terms hereof as follows:

1. I/we give permission for _____ (student's name) to participate in the activities of **Precious Me Inc.** on site and elsewhere.

Initial here _____

2. I acknowledge that **Precious Me Inc.** is an activity and such activity is subject to mishap and even injury to participants, including the potential for permanent paralysis and death. I understand and acknowledge that activities have inherent dangers that no amount of care, caution, instruction or expertise can eliminate and I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK OF DEATH OR PERSONAL INJURY SUSTAINED WHILE PARTICIPATING IN *ALL TOUR* ACTIVITIES WHETHER OR NOT CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES.

Initial here _____

3. I take full responsibility for, RELEASE AND HOLD HARMLESS **Precious Me Inc.**, their owners, officers, elected officials, agents and employees from any and all liability, claims, demands or causes of action that I may hereafter have for injuries or damages arising out of my participation in **Precious Me Inc.**, *mentor/enrichment* activities, included, but not limited to, losses CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES.

Initial here _____

4. I further agree that I WILL NOT SUE OR MAKE CLAIM against the Released parties for damages or other losses sustained as a result of any injury, or death, sustained from my participation in *any and all mentor/enrichment* activities. I also agree to INDEMNIFY AND HOLD THE RELEASED PARTIES HARMLESS from all claims, judgments and costs including attorney's fees, incurred in connection with any action brought as a result of participation in **Precious Me Inc.**, *mentor/enrichment* activities by any of the undersigned.

Initial here _____

4. I hereby expressly recognize that this Release of Liability, Waiver of Legal Rights, and Assumption of Risk is a contract pursuant to which I have released any and all claims against the Released Parties resulting from any injury, or death, sustained from participation in **Precious Me Inc.**, *mentor/enrichment* activities including any claims for negligence of the Released Parties.

Initial here _____

5. I further represent that I am at least 18 years of age (if younger, accompanied by a parent, legal guardian who accepts responsibility on their behalf), I waive and release any and all legal rights that may accrue to me as the result of any injury I may suffer while engaging **Precious Me Inc.**, *mentor/enrichment* activities.



Initial here _____

PHOTOGRAPHS AND VIDEO CONSENT

I hereby waive any right to inspect or approve the use of the still images or video recordings or of any written copy. I further waive all moral rights. I also waive any right to royalties or other compensation arising from or related to the use of the still images, video recordings, or materials. I hereby release, defend, indemnify and hold harmless the producers from and against any claims, damages or liability arising from or related to the use of the images, recordings or materials, including but not limited to claims of defamation, invasion of privacy, or rights of publicity or copyright infringement, or any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution. I am 18 years of age or older and I am competent to contract in my own name. I have read this document before signing below, and I fully understand the contents, meaning and impact of this consent, waiver, indemnity and release. This consent, waiver, indemnity and release is binding on heirs, my executors, administrators, assigns and me.

Initial here _____

VEHICLE TRAVEL PERMISSION

I/we give permission for my/our child to travel in a privately owned or a **Precious Me Inc.** owned vehicle operated and occupied by only one (1) adult.

Initial here _____

HAVE READ THIS RELEASE OF LIABILITY, WAIVER OF LEGAL RIGHTS AND ASSUMPTION OF RISK AND FULLY UNDERSTAND ITS CONTENTS. I SIGN IT OF MY OWN FREE WILL.

On this the day, _____ of _____ 20 _____

Signature of Parent/Guardian: _____

Name of Parent/Guardian: _____
(Please Print)

Name of Child Participant: _____
(Please Print)

Email Address: _____