COLLEGE FOR KIDS
WAIVER FORM

Participants under the age of 18 years must have the signed approval of a parent or legal guardian to enroll in CFK’s courses. Please print clearly!

My child _________________________________________, has my permission to register as a student and participate in CTC College for Kids classes. In case of emergency, the CTC Continuing Education office can contact me at (phone) ______________________.

If I cannot be located, please contact (friend or relative) ______________________ at ______________________. If I cannot be reached to make plans for emergency medical care for my child at the time of an illness or accident, I give permission to the CTC staff to take my child to (hospital) ______________________.

Adults allowed to pick student up after class: __________________________________________________________  Student’s age: ________

Student’s known allergies or significant medical history: _______________________________________________________________________

Parent Signature __________________________________________________________ Date ______________________________________

ASSUMPTION OF RISK, RELEASE, WAIVER AND INDEMNIFICATION

The undersigned participant and his/her parent or legal guardian does hereby execute this assumption of risk, release, waiver and indemnification for him/herself and his/her heirs, successors, representatives and assigns; and hereby agrees and represents as follows:

To release CTC, its members, employees, agents, representatives and other organizations affiliated with the courses listed above from any and all liability, loss, damage, costs, claims and/or causes of action, including but not limited to all bodily injuries, property damage, and death arising out of participation in the CFK courses referred to above, it being specifically understood that said course may include the operation and use by the undersigned participant and others of equipment, machines or animals. The undersigned, in full recognition and appreciation of the dangers and hazards inherent in the courses which I have had a full opportunity to investigate through any questions I wished to ask of the responsible person, I agree to assume all the risks and responsibilities arising out of my participating in the courses. The undersigned further agrees to indemnify CTC, its employees, members, agents, representatives and other organizations affiliated with this/these courses and hold them harmless for any liability, loss, damage, as a result of the undersigned’s participation in said course(s). This indemnification shall include attorney’s fees incurred in defending against any claim or judgment and incurred in negotiating any settlement. It is understood and agreed that the undersigned shall have the opportunity to consent to any such settlement, provided, however, that such consent shall not be unreasonably withheld.

I Have Carefully Read this Assumption of Risk and Release, Understood its Contents, and I Voluntarily Sign the Same as My Own Free Act.

Parent/Legal Guardian Signature _____________________________________________ Date _______________

Permission to Release Name to Media and to Publish Likeness

I authorize CTC to use my child’s name or likeness for publicity, advertising and/or campus printed and online publications. I understand that his/her name and/or likeness may appear in the media or various publications for an indefinite date, unless otherwise specified.

I waive any claim to financial compensation for the use of any likeness. I also waive any right to inspect or approve the finished photos and/or text.

I hereby release Central Texas College, its legal representatives and all persons acting under its permission or authority, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, typographical error, whether intentional or otherwise, that may occur or be produced in taking of said photo(s) and publication of name or information about me, or in any subsequent processing thereof, as well as any publication thereof.

I declare that I am the legal parent or guardian of the child I am representing and have every right to contract in their name in the above regard.

Parent/Legal Guardian Signature _____________________________________________ Date _______________