

**WASHINGTON STATE UNIVERSITY (WSU) 4-H ACTIVITIES
For Parents or Guardians of Participants Under 18 Years of Age
Ongoing 4-H Participation**

ASSUMPTION OF RISK

I understand that there are risks in participating in King County 4-H activities.

In consideration for, and as a condition of, being allowed to participate in this voluntary activity, I agree to take full responsibility for any and all risks that exist, including the risk of death or injury to my child or loss or damage to my property. I understand that there may be risks that WSU cannot predict or foresee, and I also assume full responsibility for those risks.

Risks in participating in the 4-H activities (club, fair, contest, leadership opportunities, national event, tour, etc) include, but are not limited to, temporary or permanent muscle soreness, sprains, strains, cuts, abrasions, bruises, ligament and/or cartilage damage, orthopedic damage, head, neck or spinal injuries, loss or use of arms and/or legs, eye damage, disfigurement, burns, drowning or death. I also recognize that there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of traveling to or from these 4-H activities that cannot be specifically listed. Further, I recognize that the actions of other participants in the activity may cause harm or loss to my child or property.

RELEASE OF LIABILITY

I hereby release the state of Washington, the Regents of WSU, WSU, any subdivision or unit of WSU, its officers, employees, King County government, and their agents, from any and all liability, claims, costs, expenses, injuries and/or losses to person or property, which I may sustain and/or sustain as a result of death or injury of my child, as a result of or connected with participation in the above event. My child's participation includes, but is not limited to, travel to and from the event in a private or public vehicle, any activity connected with the event itself, and use of state equipment or facilities for the event whether on or off WSU property. I have carefully read this document, understand its contents, and am fully informed about this program and circumstances. I am aware that this document is a contract with WSU and the program sponsors. I sign it freely and voluntarily.

PHOTO RELEASE

We hereby grant permission to Washington State University (WSU) to be photographed or otherwise have images or voice recordings made (including but not limited to digital photographs, video or digital moving images and/or voice recordings), for WSU publication or promotional purposes in any medium (including but not limited to print media, newspaper, television, video, motion picture, or Web site on the Internet)

I additionally consent to the use of the student participant's name and/or interview comments in connection with WSU publication or promotional purposes in print media, newspaper, television, video, motion picture, or Web site on the Internet.

We understand that consent to use of the student participant's likeness or voice recordings is not a condition of participating in the activity and that consent can be refused without any impact in the ability to fully participate in the program. No inducements or promises beyond our acceptance of an opportunity to promote WSU and its programs have been given to the persons signing below. Any other use of images and/or recordings, my name, and/or interview comments requires advance permission.

We understand that we can revoke this consent at any time upon notice to WSU, at which time either or both of us will sign a copy of the denial (below) for use of images or voice recordings.

As a participant in the King County 4-H program, your son/daughter may be asked to help with the evaluation of the program through a written survey. If you do not want your child to participate in evaluations please contact the 4-H Office at 206-205-3152

Date: _____ Name of Minor (Printed): _____

Name of parent or guardian _____ Signature _____

Witness's Name (Printed) _____ Witness's Signature _____
Club Leader