

SNEAD STATE COMMUNITY COLLEGE
CONSENT, RELEASE, HOLD HARMLESS AND AUTHORIZATION TO REPRODUCE PHYSICAL LIKENESS

School _____ Year _____

Role (Check all that apply): Student Teacher/Sponsor Chaperone/Volunteer Mentor

This is a Consent and Release of Rights in favor of Snead State Community College ("SSCC") as a public institution of postsecondary in the Alabama Community College System, their officers, directors, employees, successors, assigns, and volunteers who are working at the authorization or direction of SSCC, with respect to the programs and events officially offered by SSCC. This includes, by way of example, Teacher Workshops, Student Workshops, Summer Camps and Fair Day and regional and state events sponsored by SSCC, or its partners. "Participant" means any individual, student, team member, mentor, coach, teacher, or volunteer involved in an Event.

In consideration of my participation in one or more events, I agree to the following: I hereby grant to SSCC the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sound (as "Works") during my presence at an event and assign and grant all rights in these Works to SSCC. SSCC shall have the right to use or sublicense these Works, including my name, likeness and biography, at their discretion, in all media, for the promotion of SSCC, their mission, and affiliated programs. I also acknowledge that SSCC events are public events that may be attended by the members of the press, business corporations, and media ("commercial guests") not under the control of SSCC who might photograph or videotape the event.

There are risks inherent in participating in SSCC events, including, for example, risks in the construction of robots and structures, working with electrical connections, traveling to and from events, and participating in public competitions. These risks include the risk of bodily harm (including without limitation, death) and property damage or loss. **Being fully cognizant of the risks of participating in an SSCC event, I hereby assume those risks. Except to the extent due to the gross negligence or willful misconduct of SSCC, to the fullest extent permitted by applicable laws, I HEREBY WAIVE AND RELEASE ANY CLAIMS OR CAUSES OF ACTION which I may now or hereafter have against SSCC arising in connection with my participation in any SSCC event, or arising from unofficial SSCC programs and events offered by others. I hold harmless SSCC, against any and all claims resulting from such participation, including, without limitation, claims for compensation, defamation, or invasion of privacy, or other infringements or violations of personal or property rights of any sort whatsoever.**

I understand that teachers have responsibility for maintaining and safeguarding the wellbeing of students while participating in SSCC activities. I understand that SSCC does not perform background checks on visiting teachers, mentors or other volunteer participants in events. Teachers should follow the school district policies regarding the involvement of adult volunteers with their teams. I will not hold SSCC liable for the actions of teachers, mentors or other participants.

I will not hold SSCC liable for any injury that may occur to me as a result of participation in any event or activity related to this program. In the event I should sustain injuries or illness while involved in an SSCC event, I hereby authorize SSCC to provide or arrange for first aid, professional emergency treatment, or hospital treatment needed as determined by SSCC, including the performance of emergency procedures, the administration of medications, and emergency transportation, at my cost and risk.

This Release shall be binding upon my heirs, my personal representatives and assigns, and me and shall be governed by and construed under the laws of the State of **Alabama**, which shall be the venue for any legal action. This Release constitutes the entire agreement among the parties hereto with respect to the subject matter of this Release and supersedes any and all such previous agreements among the parties, whether written or oral.

Participant Name [Printed]	Participant Signature	Date	Date of Birth [MM/DD/YY]
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For Participants under the age of eighteen (18) years listed above: I hereby consent and agree to the above as the Parent / Legal Guardian of the Participant, in which case "I", "me" and "my" as used herein shall refer to said minor.

Parent or Legal Guardian Name [Printed]	Parent or Guardian Signature	Date
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