



PARENTAL CONSENT FORM

A copy of this form, with "original" signature must be on file for registrants under the age of 19. Please complete and mail to the address at right or deliver to the instructor when reporting for class.

MAIL TO: Continuing Education and Outreach JSU McClellan Center 100 Gamecock Drive, Anniston, AL 36205

PARENTAL RELEASE

Please read this document carefully before signing. THIS IS A LEGALLY BINDING DOCUMENT and must be signed by a parent or legal guardian before any minor child will be allowed to attend the class(s) listed on the preceding page(s).

I, the undersigned, give my consent for my minor child (hereafter "Participant") to attend the Jacksonville State University Continuing Education course(s) or event(s) (hereafter "Class(s)") listed under the Course Selection of this document and in consideration of the Participant's participation, I hereby agree as follows:

I hereby grant my permission for a qualified physician, athletic trainer, EMT and/or hospital emergency room to administer necessary health care to the Participant in the case of any accident and/or emergency.

I acknowledge, understand and appreciate that as part of the Participant's participation in the Class(s) there may be are dangers, hazards and inherent risks to which the Participant might be exposed, including the risk of physical injury, temporary or permanent disability, and/or death, as well as economic and property loss. I further realize that participating in the Class(s) may involve risks and dangers, both known and unknown, and have elected to allow the Participant to take part in the Class(s). Therefore I, on behalf of the Participant, voluntarily accept and assume all risk of injury, loss of life or damage to property arising out of training, preparing, participating and traveling to or from the Class(s).

I, on behalf of, and as the Participant's parent, guardian and/or next of kin , hereby release Jacksonville State University, its Board of Trustees, Administration, Faculty, Staff, and all other officers, directors, employees and agents (hereafter "JSU") from any and all liability as to any right of action that may accrue to my heirs or representatives for any injury and/or loss that the Participant may suffer while training, preparing, participating and/or traveling to or from Class(s). This agreement is binding on my heirs and assigns.

I, on behalf of, and as the Participant's parent, guardian and/or next of kin, furthermore release, indemnify and hold harmless JSU from and against any and all liability, actions, debts, claims and demands of any kind whatsoever, specifically including, but not limited to, any claim for negligence or negligent acts or omissions and any present or future claim, loss or liability for injury to person or property that the Participant may suffer, for which the Participant may be liable to any other person, that may or does arise out of the Participant's participation in the Class(s). I understand that JSU accepts no responsibility for the Participant's personal property or the personal property of any others that may be in the possession of the Participant.

In the event of an accident or serious illness, I hereby authorize representatives of JSU to obtain medical treatment for the Participant on my behalf. I hereby hold harmless and agree to indemnify JSU from any claims, causes of action, damages and/or liabilities, arising out of or resulting from said medical treatment. I further agree to accept full responsibility for any and all expenses, including medical expenses that may derive from any injuries to the Participant that may occur during his/her participation in Class(s).

This RELEASE shall be governed by and construed under the laws of Alabama. I agree that any legal action or proceeding relating to this RELEASE, or arising out of any injury, death, damage or loss as a result of my the Participant's participation in any part of the Class(s), shall be brought only in Calhoun County, Alabama.

This RELEASE contains the entire agreement between the parties to this agreement and the terms of this RELEASE are contractual and not a mere recital. The information I have provided is disclosed accurately and truthfully. I have been given ample opportunity to read this document and I understand and agree to all of its terms and conditions. I understand that I am giving up substantial rights (including my right to sue), and acknowledge that I am signing this document freely and voluntarily, and intend by my signature to provide a complete and unconditional release of all liability to the greatest extent allowed by law. By my signature below, I acknowledge that this document is intended to bind not only myself and the Participant, but also the successors, heirs, representatives, administrators, and assigns of myself and the Participant.

Participant Name (PRINT)*

Parent/Guardian Name (PRINT)*

Participant Signature*

Parent/Guardian Signature*

Date*