

PARENT/GUARDIAN PERMISSION FORM FOR YOUTH PARTICIPANT

Both sides of this form must be completed by all youth participating in overnight activities, field trips, events requiring group transportation, and any other events hosted at Rutgers, The State University of New Jersey where it is deemed necessary by the event coordinator(s) responsible for the youth participants. The form should be submitted prior to the event. The form has five parts: (1) information about the participant and activity, (2) parental permission and liability release, (3) medical emergency authorization and health information, and (4) code of conduct and (5) media policy. *Be sure to complete all five parts and sign where requested!*

Information about the Youth Participant and Activity

Name of Youth Participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

Birthdate: _____ Grade: _____ Age at Time of Participation: _____

Name of Activity/Event: _____


Name of Group Sponsoring or Participating in this Event: _____

Location of Event: _____

Date and time of participation of individual named above: _____

Parental Permission and Release of Liability

I hereby give my son/daughter named above permission to participate in the event listed. Although the event coordinator(s) will use the utmost precaution in guarding the health of the above participant and preventing accidents, I release them from any liability in case of illness or injury as a result of this activity. Furthermore, I release the owner and driver of the car transporting my child to and from the event, from any liability in case of illness or injury.

 Signature of Parent or Guardian: _____

Medical Emergency Authorization and Health Information

I authorize the event coordinator(s) to dispense the prescription drugs and/or over the counter medications listed below in accordance with the instructions provided on the label (prescription drugs) or below (over-the-counter medications). In case of sudden illness or an accident to the above named participant requiring immediate treatment or surgery while he/she is a participant in this activity, I authorize the chaperone(s) to take such action as seems appropriate to protect the health and physical well-being of the above participant. This authority extends to any physician(s) and/or surgeon(s) selected by the event coordinator(s) to perform medical and/or surgical procedures including examinations and tests necessary to preserve the health and physical well-being of the above named participant. All efforts will be made to contact the parent(s) or guardian(s) in case of emergency.

Name of Parent/Guardian	Phone Number	Name of Additional Emergency Contact	Phone Number
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The following information is provided as an aid to the event coordinator(s) in dealing with the well-being of the participant. The participant has the following health conditions: (include allergies, handicaps, diabetes, pregnancy, asthma, medications needed, etc.).

Health conditions: _____

Medications/Instructions: _____

Health Insurance: _____ Company Group# _____ ID# _____

 Signature of Parent or Guardian: _____

Youth Program Code of Conduct

The primary purpose of the Youth Program Code of Conduct is to ensure the safety and well-being of all participants at events and activities hosted at Rutgers, The State University of New Jersey. It applies to all participants including minors, their parents, and volunteers.

As a participant in this program, I will:

- Conduct myself in a courteous manner and treat members, parents, volunteers, staff, and others with respect. Appropriate language and behavior are expected at all times.
- Respect and adhere to the rules and guidelines of the program including all those specific to this event or activity.
- Uphold an individual's right to dignity by supporting an environment of inclusion which welcomes involvement of participants from all backgrounds.
- Obey local, state and federal laws.

Participants who fail to adhere to the Youth Program Code of Conduct are subject to a range of disciplinary actions. When appropriate, immediate corrective action will be taken at the event to ensure the safety and welfare of all participants.

I understand if I fail to adhere to the above Code of Conduct, I will be subject to disciplinary action and potentially prohibited from attending and participating in this event and future programs at Rutgers University.

	_____	_____
	Signature of participant in event	Date
	_____	_____
	Signature of parent or guardian	Date

Media Policy and Release

Rutgers, The State University of New Jersey routinely promotes programs and activities involving minors through various media. This includes, but is not limited to newsletters, newspapers, brochures, and displays. In doing so, the names and photos of members may be included to help tell the story.

- No, do not use my individual picture for any purpose. I will make an effort to avoid opportunities to be in group photos.
- No, do not use my name for any purpose.