

## PARENT / GUARDIAN CONSENT FOR STUDENT PARTICIPATION / TRAVEL

STUDENT			
<b>Student</b> <input style="width: 95%;" type="text"/>	<b>Phone</b> <input style="width: 95%;" type="text"/>	<b>Date of birth</b> <input style="width: 95%;" type="text"/>	<b>Grade</b> <input style="width: 95%;" type="text"/>
<b>Email</b> <input style="width: 95%;" type="text"/>	<b>Address</b> <input style="width: 95%;" type="text"/>	<b>City</b> <input style="width: 95%;" type="text"/>	<b>Zipcode</b> <input style="width: 95%;" type="text"/>

TRIP DESCRIPTION			
<b>Activity Participating In</b> <input style="width: 95%;" type="text"/>	<b>Trip dates</b> <input style="width: 95%;" type="text"/>	<b>Location Traveling From</b> <input style="width: 95%;" type="text"/>	<b>Location of Activity</b> <input style="width: 95%;" type="text"/>

PARENTS / GUARDIANS		
<b>Parent/Guardian (s)</b> <input style="width: 95%;" type="text"/>	<b>Home Phone</b> <input style="width: 95%;" type="text"/>	<b>Work / Cell Phone</b> <input style="width: 95%;" type="text"/>
<b>Parent/Guardian</b> <input style="width: 95%;" type="text"/>	<b>Home Phone</b> <input style="width: 95%;" type="text"/>	<b>Work / Cell Phone</b> <input style="width: 95%;" type="text"/>

SCHOOL		
<b>School</b> <input style="width: 95%;" type="text"/>	<b>Principal</b> <input style="width: 95%;" type="text"/>	<b>School Phone</b> <input style="width: 95%;" type="text"/>
<b>Advisor</b> <input style="width: 95%;" type="text"/>	<b>Email</b> <input style="width: 95%;" type="text"/>	<b>Home Phone / Cell</b> <input style="width: 95%;" type="text"/>

CONSENT FOR PARTICIPATION		
<p>I hereby give my consent for the above named student to engage in Alaska Association of Student Governments (AASG) as a representative of his/her school. I also give my consent for the the above named student to accompany the group as a member on out-of-town trips.</p>		
<b>Parent/Guardian Name (please print)</b> <input style="width: 95%;" type="text"/>	<b>Parent/Guardian Signature</b> <input style="width: 95%;" type="text"/>	<b>Date</b> <input style="width: 95%;" type="text"/>

CONSENT FOR EMERGENCY MEDICAL TREATMENT		
<p>I hereby give my consent to <u>emergency medical treatment, hospitalization or other medical treatment</u> as may be necessary for the welfare of the above named student, by a physician, qualified nurse, and/or hospital in the event of illness or injury during all periods of time in which the student is away from his or her legal residence as a member of an interscholastic activity group. I further hereby waive on behalf of myself and the above named student, any liability of the school district or AASG or ASAA, their respective officers, agents or employees, arising out of such medical treatment.</p>		
<p>Coverage is provided as follows:    <input type="checkbox"/> Native Services                      <input type="checkbox"/> Military                      <input type="checkbox"/> Private Insurance Carrier  <input type="checkbox"/> Denali KidCare    <input type="checkbox"/> None. I will assume financial responsibilities for injuries.</p>		
<p>Name of Insurer: _____ Policy Number: _____ Phone of Insurer: _____</p>		
<b>Parent/Guardian Name (please print)</b> <input style="width: 95%;" type="text"/>	<b>Parent/Guardian Signature</b> <input style="width: 95%;" type="text"/>	<b>Date</b> <input style="width: 95%;" type="text"/>

WAIVER OF LIABILITY (INSURANCE COVERAGE)		
<p>I understand that ASAA and AASG do not carry medical or liability insurance covering students traveling for interscholastic activities. I HEREBY WAIVE ON BEHALF OF MYSELF AND THE ABOVE NAMED STUDENT ANY LIABILITY RESPONSIBILITIES OF ASAA OR AASG, EITHER ORGANIZATIONALLY OR FOR ANY OF ITS OFFICERS, AGENTS OR EMPLOYEES, FOR INJURIES OR DAMAGES SUSTAINED IN THE INTERSCHOLASTIC PROGRAM. I also understand that medical or liability insurance is my responsibility.</p>		
<b>Parent/Guardian Name (please print)</b> <input style="width: 95%;" type="text"/>	<b>Parent/Guardian Signature</b> <input style="width: 95%;" type="text"/>	<b>Date</b> <input style="width: 95%;" type="text"/>

EMERGENCY CONTACT		
<b>Emergency Contact's Name</b> <input style="width: 95%;" type="text"/>	<b>Relationship to Student</b> <input style="width: 95%;" type="text"/>	<b>Phone</b> <input style="width: 95%;" type="text"/>

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