



## Nebo School District Afterschool Program Consent and Waiver

The safety and well-being of students is of great concern to Nebo School District. Accordingly, reasonable efforts are made to ensure that 4-H activities are conducted in a safe manner.

The undersigned, Student and Parent/Legal Guardian on behalf of the Student, understands and acknowledges that participation in 4-H activities such as, but not limited to cooking, sewing, drama, robotics, science, athletics, archery, and fishing carries with it the potential for physical injury, property loss, or even death in extreme cases. Accordingly, with 4-H activities, there are certain unavoidable, unpredictable, and inherent risks that no amount of care, caution, or instruction can eliminate, and the undersigned expressly and voluntarily assume any and all risks of personal injury, property loss, death, and other damages sustained while participating in 4-H.

The undersigned consents to the Student participating in 4-H activities. This consent includes travel to and from 4-H activities that are not held on school district property.

The undersigned, Student and Parent/Legal Guardian on behalf of the Student, in consideration of having the Student participate in 4-H in any way, hereby releases, indemnifies, and holds harmless Nebo School District, the school hosting the class/activity, district and school employees and/or agents, coaches, volunteers, officials, and other participants (herein collectively the "Released Parties") of and from any and all claims, liabilities, and expenses (including attorney's fees) arising from personal injury, illness, death, property damage, theft, and other losses arising directly or indirectly from the Student's participation in 4-H activities.

The undersigned has been advised that the Released Parties insurance coverage does not cover accidental personal injury, property loss, or accidental death as a result of participation.

The undersigned has been advised that if during the course and scope of a 4-H activity, the Student needs medical attention; reasonable efforts will be made to contact the Parent/Legal Guardian. In the meantime, the Parent/Legal Guardian consents to a 4-H official taking, arranging for, and consenting to the procedures or treatment deemed necessary by health care providers for the Student. The Parent/Legal Guardian of the student will pay all costs associated with such medical procedures/treatment.

The undersigned acknowledges, understands, and agrees that the Student shall follow any and all rules and procedures, written or oral, instituted by the Released Parties, and the undersigned further acknowledges, understands, and agrees that a violation of any such rules and procedures by the Student may result in the termination of the Student's right to participate in the 4-H.

\_\_\_\_\_  
Child's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date