



PARENT/GUARDIAN CONSENT FORM

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING BELOW

- I give permission for my child to participate in [YU?] activities and programs, knowing there is a certain amount of risk involved in all activities. I further understand that [YU?] is not responsible for the time or manner in which my child may arrive or leave [YU?] activities.
- I give my child permission to take surveys to measure my child's involvement and success in [YU?] activities.
- I understand that [YU?] may use photographs and videos of my child for promotional purposes such as on the [YU?] website, Facebook page, or advertising materials.
- I give permission for my child to participate in field trips and other activities sponsored by [YU?].
- I understand that [YU?] staff and volunteers are not responsible for lost or stolen personal items while students are in attendance. I understand the risk of allowing my child to bring personal items to [YU?] and recognize that [YU?] will not be held accountable for any reimbursement of lost or stolen items.
- I understand that transportation may be provided by [YU?] staff or volunteers. I give consent to have my child transported by staff and volunteers. I understand that [YU?] and its staff/volunteers are not liable for any incidents that occur during transport.
- I fully understand that the program involves mentors, who shall be selected from the community and will be screened (including a criminal background check) and trained before beginning in the program. A mentor will be expected to engage with my child via social media and/or traditional medium twice a month. I will be responsible for monitoring that engagement.
- I understand that my child will participate in an orientation session at the [YU?] or via online medium in which the program will be explained. The program is planned to last until graduation and continuation may then be discussed at the end of each semester.
- I understand that during the course of the [YU?] engagement there may be special group events (incorporating all mentors, youth, young professionals, volunteers, staff and etc) and family events (such as confab)planned. I understand that the staff of the [YU?] will provide ongoing monitoring of the mentoring activities with my assistance.
- In the event that an accident should occur, I take full financial responsibility for any medical expenses my child may incur as a result of participating in [YU?] activities. In case of serious injury or illness, I give [YU?] staff and/or emergency personnel permission to administer any necessary treatment to my child, including contacting the doctor or ambulance at my expense.
- I agree that [YU?], its employees/volunteers, Board of Directors, and affiliated agencies shall not be held liable for any claims, demands, actions, or causes of action, whatsoever, for an injury caused to me or my child as a result of my child's involvement in [YU?] activities. I expressly relieve and discharge [YU?] from all acts of negligence on the part of [YU?], its employees/volunteers, the corporation, agents, officers, and affiliated agencies.
- I give permission for [YU?] and its staff to communicate demographic, academic (i.e. transcripts), and behavioral information to [YU?] for the purpose of providing educational assistance and enhancement to my child. Such information is to be used only by [YU?] for grant writing purposes while keeping the

child's name confidential. Information shall not be transferred for any other purposes without consent of a parent/guardian or legal authority.

- I understand that the [YU?] is committed to a safe and civil environment for all students, employees, board members, parents/guardians, volunteers, and community members that is free from harassment, intimidation, or bullying. My family agrees to follow the policy and agree that my child will be subject to implementation of this policy during attendance at all [YU?] functions. I understand that any and all minor acts of harassment, intimidation, or bullying could result in immediate dismissal from the [YU?] at the discretion of the Board of Directors and the [YU?] staff.
- I have read and understand this [YU?] policy and expectation.
- The disclosure of information is voluntary and will be kept confidential as required by law. Refusal to provide information will not subject the program participant to any adverse treatment (except that where the disability status is a requirement for participating in a program or activity, the program participant may be found ineligible if he/she does not disclose his/her status). This information will only be used in accordance with the law.

Student Full Name (Printed): _____

Parent/Guardian Full Name (Printed): _____

Parent/Guardian Signature: _____

Date: _____

THE "WHY YOU?" INITIATIVE, INC.