

**WI NATIONAL GUARD REGION V
MILITARY TEEN SUMMIT**

2012

Name of Child: _____

Parent Weekend Phone #: _____

Does any other person have permission to retrieve child? ___ YES ___ NO

If YES, who? _____ Phone # _____

YOUTH'S HEALTH INFORMATION

Is the child in good health: ___ YES ___ NO

Does the child suffer from any allergies, require any medication, or suffer from any medical or emotional conditions: ___ YES ___ NO

If YES, please explain:

Can your child administer their own medication if required? ___ YES ___ NO

Does child have any disabilities? ___ YES ___ NO

If yes please explain:

Child's T-Shirt Size:

___YS ___YM ___YL ___YXL ___AS ___AM ___AL ___AXL ___AXXL

Parent Signature

Date

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CHILD/GUARDIAN

GENERAL RELEASE, INDEMNITY AND HOLD HARMLESS AGREEMENT, AND COVENANT NOT TO SUE with PHOTO/MEDIA RELEASE

This is an important document. Please read it carefully before you sign and return it. If you have any questions about signing the document, please consult with your personal attorney. You may negotiate or bargain over the language in this document.

In consideration for permission for my child to use the facilities of the *American Family Conference Center* for training, including recreation facilities, training areas, I, the parent/legal guardian of _____ (participant), do hereby release, acquit, discharge, indemnify, and hold harmless, the Wisconsin National Guard, the Wisconsin Department of Military Affairs, the State of Wisconsin, the National Guard Bureau and the Department of Defense, the United States of America, their officers, personnel, employees, and agents from any and all cause or causes of action, including personal injury, illness, death, property damage, cost, charges, claims, demands, and liabilities of whatever kind, name, or nature in any manner arising from the use of such facilities by my child, provided that this waiver of liability does not apply to any acts of gross negligence, or intentional, willful, or wanton misconduct. This waiver of liability expressly releases the aforementioned parties from their own negligence, as well as my own or that of my charge.

Moreover, I hereby agree not to initiate suit or any form of litigation or judicial proceeding or to make any claim or claims of any type against, the Wisconsin National Guard, the Wisconsin Department of Military Affairs, the State of Wisconsin, the National Guard Bureau and the Department of Defense, the United States of America, their officers, personnel, employees, or agents, to include, but not limited to death, personal injury, medical claims or property damage, directly or indirectly relating to or arising from or arising out of or by reason of the use of the facilities by my child.

I understand that the activities that will take place are inherently dangerous and may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. By this waiver, I assume any risk and take full responsibility.

I have read and understand the nature and significance of this general release, indemnity, and hold harmless agreement and agree to its provisions.

DATE

SIGNATURE OF PARENT OR GUARDIAN

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PHOTO/MEDIA RELEASE

By checking this box I agree to the following provision:

I understand that the Wisconsin National Guard Family Program is developing photographic and multi-media materials which will illustrate activities of the Wisconsin National Guard Youth Program. I grant to the Wisconsin National Guard, or any of its subordinate entities, the right to take, use, reproduce, assign, and/or distribute photographs, films, videotapes and sound recordings of the participant, for use in any such materials the Wisconsin National Guard or the Wisconsin Department of Military Affairs may create, without any payment to or future approval by me. I concur that there shall be no payment for such use.

DATE

SIGNATURE OF PARENT OR GUARDIAN

TYPED OR PRINTED NAME OF CHILD
SIGNATORY

TYPED OR PRINTED NAME OF

RELATIONSHIP OF SIGNATORY TO CHILD

PRIVACY ACT STATEMENT

AUTHORITY: U.S.C. 301, 10 U.S.C. 8012 and EO 9397

PRINCIPAL PURPOSE: To prepare photographs for news stories written by military civilian news media reporters to recognize the achievements of participants, members of the Army and Air National Guard, and the Wisconsin National Guard Family Program.

ROUTINE USE: Information may be disclosed to Wisconsin National Guard and National Guard Bureau agencies plus bona fide civilian news media organizations. Once published information is considered public domain.

DISCLOSURE IS VOLUNTARY: Releases of this nature are used, not only to recognize achievements of members, participants, and the Family Program but to act as a catalyst for enhancing public understanding of the military in general as a vital part of our free society.

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I understand that my child, _____ while participating in the Military Teen Summit, February 17-19, 2012, will be dismissed at the times listed on the agenda. I also understand that because of the age of the participants, we will not require that the youth wait for a parent or guardian to pick them up before dismissing them, unless otherwise indicated below.

If I have indicated below that I would like my child to wait for me, or an otherwise named party, in addition, I agree to be on time in picking him/her up. If my child is allowed to leave without a parent or guardian picking them up I agree to provide my child with a key to our hotel room.

Please mark the box below if you would like your child to wait to be picked up.

I would like my child to wait for me or another designated person to pick them up from the Teen Summit at the time listed on the agenda.

Print Name

Signature

Date

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CODE OF CONDUCT

By signing this code of conduct, I agree to conduct myself in a respectful manner at all times, consistent with the philosophy of the National Guard. I agree to respect the authority of and comply with the requests made by the facilitators, chaperones, event personnel, and National Guardsmen while attending any activity sponsored by the Wisconsin National Guard Youth Program. I will take full responsibility for any damage to personal or public property due to my actions. I understand that any violations dealing with curfew, drugs, alcohol, tobacco products, or inappropriate behavior during this event will not be tolerated and could result in expulsion from the activity and the Teen Summit. Finally, I agree that my clothing attire will be appropriate at all times during the Teen Summit. I will not wear clothing that has vulgar, inappropriate or suggestive statements on it or wear clothing that is too revealing.

Signature of Youth Applicant: _____ **Date:** _____

Parent or Legal Guardian: _____ **Date:** _____