

Volunteer / Participant Full Name: _____ (circle volunteer or participate)

**Please include first, middle, and last name.*

Age: _____ **DOB:** _____ **City/State:** _____ **School Name:** _____

Program / Activity: _____ **School Grade:** _____

Program Location: _____ **Program Date and Time:** _____

Special considerations (food allergies, etc.): _____

Volunteer or Parent/Guardian contact info, if minor age 17 & under (full name, phone, & email):

May we have permission to take the volunteer's or participant photograph or video which may be used by National STEM Society, Inc.'s website, in print, electronic media and/or newspapers for the promotion of this program/activity? **NOTE: All National STEM Society events are photographed.**

YES ☐ **NO** ☐

May we have permission to use the volunteer's participant first name and/or grade which may be used by National STEM Society, Inc.'s website, in print, electronic media and/or newspapers for the promotion of this program/activity?

YES ☐ **NO** ☐

Consent, Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement (the "Agreement")

☐ **I, ("the volunteer") am agreeing I am clear of any felonies, violent crimes, or child abuse claims. I give permission for a criminal background check. Initial _____ Driver License# _____**

Please read carefully

I agree and understand that the volunteer or participant named on this form may be a minor (ages 17 and under) pursuant to the Age of Majority and Accountability Act and has my permission to participate in the program/activity indicated on this form. As the volunteer or participant registered in the program/activity, I ("the volunteer" over age 16) and the participant agree to indemnify and hold harmless National STEM Society, Inc.'s Corporation and its Subsidiaries (collectively "National STEM Society") from all claims, demands, actions and causes of action, losses, costs or damages that National STEM Society, Inc.'s may suffer, incur or be liable for in relation to any injury the volunteer or participant may suffer or cause to others in connection with the volunteer's or participant's negligence or actions while the volunteer or participant is participating in the program, activity or event. Furthermore, I ("the volunteer") and the participant hereby release, waive, and discharge National STEM Society, Inc.'s from all liability to our heirs, executors, administrators for all losses or damages and any claims or demands for such losses or damages due to injury to any person or property.

By signing this agreement, I the volunteer or participant understand that I will be assuming risk of injury and certain legal risks. I, as the Volunteer or participant, confirm that I understand and agree to the conditions contained in this Agreement prior to signing it.

– Print Name (parent name if minor)

– Signature (parent signature if minor)

Date