



TEMPLE UNIVERSITY TAKE OUR DAUGHTERS & SONS TO WORK DAY, April 24, 2008
PARENT / GUARDIAN
CONSENT, LEGAL RELEASE & EMERGENCY FORM

I am the parent, legal guardian or host employee (non-custodial relative) of the individual(s) (below) participating in Temple University's Take Your Daughters and Sons to Work Day.

I acknowledge that my child(ren) is/are attending this program voluntarily with my permission and that my child(ren) and I understand that the individual(s) listed below will be accompanied by University volunteers. **I also understand that parents and/or guardians are not permitted to attend the sessions or programs (except for registration and lunch period).**

I represent that my child(ren) is/are physically able, with or without accommodation, to participate in this program as described. I understand and I agree to assume for myself and my child all risks involved in my child's participation in the program.

In consideration of the University providing the opportunity for my child(ren) to attend this program, I voluntarily release, hold harmless and indemnify Temple University, its trustees, officers, faculty, employees, students and agents from any and all claims, causes of action, injuries, damages or losses of any kind that may arise from my child's participation in the program or from travel to or from activities at the University.

In case of emergency, please contact me at my work telephone # _____ ext. or my cell phone at # _____. I agree to be financially responsible for any medical bills incurred as a result of medical treatment during or arising from my child's participation in the Program.

I hereby authorize and give permission to Temple University, and those acting under its direction, to photograph the participant(s) (below) to be used for publications of the University.

I am signing this Consent and Legal Release with an understanding of its contents and with the intention to be legally bound by it.

In the event that the participant is a hosted child (i.e., invited by a non-custodial relative), then the participant's parent or legal guardian must sign below indicating that s/he acknowledges and agrees to the terms of this consent, release and emergency form.

Printed Name of Participant(s)

Printed Name/Parent/Guardian/Host emp.

Signature of Parent / Guardian

Date

Signature of Temple Host Employee
(if not Parent/Guardian)

Date