Stanislaus County Office of Education

Tom Changnon, Superintendent

1100 H Street • Modesto, CA 95354 • (209) 238-1700 • FAX (209) 238-4201

2013 – 2014 Mock Trial - Student Permission Slip & Code of Ethics

(Student's name)_____ from (school) _____ Grade_____ has my permission to participate in the Stanislaus County Mock Trial Competition, **January 14, 16 & 22, 2014.**
We have reviewed and understand the rules of the competition.

Release and Covenant not to sue/Authorization for Medical Care
In consideration for their participation in the Stanislaus County Mock Trial Competition/Courtroom, I agree to indemnify, defend and hold harmless Stanislaus County Office of Education (SCOE) and program organizers and sponsors for any and all claims, damage, costs and expenses resulting from lawsuits and other proceedings by any third parties arising out of any acts, omissions or conduct of my child while s/he is participating in the Stanislaus County Mock Trial Competition.

As a participant in the 2013-14 Mock Trials, I authorize SCOE and or assignees or licensees to use photographs of my child, video images for reproduction for promotional or illustrative purposes. I understand that the above activities will not result in any profit, and that I will not receive any monetary compensation. Permission is granted to make changes or alterations and to use my name or a fictitious name in editorial works or advertising.

The undersigned acknowledges that the competition addressed by this release is completely VOLUNTARY. I agree to have my child receive any emergency medical services deemed necessary by the authorities in charge. It is understood that the resulting expenses will be the responsibility of the parent/guardian.

_____ _____ _____
Parent/Guardian Name (please print) Parent/Guardian Signature DATE

Address: _____ City_____ Zip_____

Home Phone: _____Cell Phone: _____

*Parents and/or Students e-mail address:_____ _____
Parent E-Mail Student E-Mail

***Note: To be used for a Mock Trial Alumni Database**

If I cannot be reached in case of an emergency, please notify:

_____ _____ _____
Name Phone Relationship

TEAM CODE OF ETHICS

As a condition of participation in the 2013-14 Stanislaus County Mock Trial Program, each student participant must carefully read the statement below and then sign to acknowledge her/his commitment to the statement.

As a participant of the 2013-14 Stanislaus County Mock Trial Program, I pledge to adhere to the same high standards of scholarship that are expected of me, as a student, in my academic performance. I understand that plagiarism of any kind is unacceptable. I understand that all written and oral work done in conjunction with this program must be my own. In relation to other teams and individuals with whom I come in contact through participation in this program, I pledge to make a commitment to act with good sportsmanship and respect for others in both victory and defeat. I agree to follow all rules set by SCOE and CRF. I acknowledge that my actions will reflect upon my whole team, and I promise to take personal responsibility for my own actions throughout the competition.

_____ _____ _____
Student Participant Signature School Date