

## ASSUMPTION OF THE RISK FORM

I agree that as a student in the **2018 Ranken Summer Adventure Academy Program** at Ranken Technical College (the "College") scheduled for week-long events July 9 through August 3, 2018 , I am responsible for my own behavior and well-being. I accept this condition of participation, and I acknowledge that I have been informed of the general nature of the risks involved in this activity.

I hereby grant to the College and to the press and media, the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sounds (as "Works") during my participation in the Ranken Adventure Academy. I further acknowledge that these cooperating entities have the right to use or sublicense these Works in all forms and for all purposes, including without limitation, advertising and other promotions for the Ranken Adventure Academy. It is our policy not to print a minor's name with his/her picture without specific permission from his/her parent or guardian.

I understand that in the event of accident or injury, personal judgment may be required by College personnel regarding what actions should be taken on my behalf. I hereby authorize the College personnel to call upon an ambulance or other medical personnel to provide the best care for my child/ward. Nevertheless, I acknowledge that the College personnel may not legally owe me a duty to take any action on my behalf. I also understand that it is my responsibility to secure personal health insurance in advance, if desired, and to take into account my personal health and physical condition.

I further agree to abide by any and all specific requests by the College for my safety or the safety of others, as well as any and all of the College's rules and policies applicable to all activities related to this program. I understand that the College reserves the right to exclude my participation in this program if my participation or behavior is deemed detrimental to the safety or welfare of others.

In consideration for being permitted to participate in this program, and because I have agreed to assume the risks involved, I hereby agree that I am responsible for any resulting personal injury, damage to or loss of my property which may occur as a result of my participation or arising out of my participation in this program, unless any such personal injury, damage to or loss of my property is directly due to the negligence of the College. I understand that this Assumption of the Risk form will remain in effect during any of my subsequent visits and program-related activities, unless a specific revocation of this document is filed in writing with the program coordinator, at which time my visits to or participation in the program will cease.

My child/ward is under 18 years of age and I am hereby providing permission for him/her to participate in this program. I give permission for my child/ward to leave campus only for the purpose of attending a camp field trip(s). I agree to be responsible for his/her behavior and safety during this event.

***I acknowledge that I have read and fully understand this document. I further acknowledge that I am accepting these personal risks and conditions of my own free will.***

\_\_\_\_\_ My child/ward is under 18 years of age and I am hereby providing permission for him/her to participate in this program, and I agree to be responsible for his/her behavior and safety during this event.

\_\_\_\_\_  
CHILD SIGNATURE

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE