PARENT PERMISSION AND RESPONSIBILITY STATEMENT FOR

STUDENT PARTICIPATION IN DISTRICT AND NON-DISTRICT SPONSORED CLUBS, EVENTS, AND ACTIVITIES

Refer to school board policies 2430 and 5730 for District and Non-District Sponsored Criteria

Satellite High School
School Name

Date

Student Name

Grade

Activity/Event: _____
List activity/event

ON March 28, 2025
Date(s) and time of Event

Mrs. Vitaliano
Adult Supervisor

LOCATION OF EVENT/ACTIVITY SHS Gym

NATURE OF EVENT/ACTIVITY Opportunity for students to explore possibilities for their future- College and Career

Staff/Guests who will be present during event/activity Admin, Mrs. Vitaliano, College Representatives

Parents should direct questions concerning the activity to the school office

Name Mrs. Vitaliano
Adult Supervisor

Telephone: (__) 779-____ (__) 2000-____
(School Number) (Mobile Phone)

(ALL THE ABOVE TO BE COMPLETED BY THE SCHOOL)

PARENTAL AUTHORIZATION AND ACKNOWELDGMENT OF RISKS

1. I understand that participation in this event/activity is voluntary.
2. The parent or guardian and student are responsible for transportation to and from the event/activity unless otherwise specified.
3. The parent or guardian and student understand that the school district, its officers, agents, or employees are not responsible for the student during the time he/she is traveling to or from the event/activity, unless the school is providing transportation.
4. The parent or guardian, and student will assume the liability during the entire course of the student's participation in the event/activity and will indemnify and hold the School Board of Brevard County harmless for any injury or accident or property loss involving the student.
5. Parent or guardian permission for the student to participate in the above event/activity may be withdrawn at any time by contacting the school and/or sponsor.
6. In the event of medical emergency, I/We authorize the sponsor or chaperone in charge of the event/activity to seek emergency medical treatment for my child at my expense.

I/We have read and understand the information above and accept the designated responsibilities. I hereby grant participation in all aspects of the above Student Club and/or Activity/Event..

□Granted □ Denied □ Granted with the following exceptions: _____
(Describe)

Student Signature – Date
(Optional for Elementary School)

Parent/Guardian Signature– Date
(Required for all)