

**MICHIGAN STATE UNIVERSITY YOUTH PROGRAM
PARENT/GUARDIAN CONSENT FORM**

I grant permission for (print participant's name) _____ to participate in all educational and social activities of the following MSU program or activity:

Program name: Sibs and Kids Weekend

Program dates: February 8th and 9th, 2019

MSU unit/department: Universities Activities Board (UAB)

I understand that sessions may entail field trips and/or campus facility tours. I also understand that participants may engage in athletic or other recreational activities that have special risks.

I have read the session descriptions and approve of my child's selections. I accept any risks associated with the assigned sessions and selected recreational activities.

I understand that my child has a role to play as regards his or her safety and security. I will speak with my child about the need to honor safety rules and to behave responsibly.

(Please print):

(Parent or legal guardian)

Signature: _____ Date: _____

PARENT/GUARDIAN CONSENT TO STAY OVERNIGHT IN UNIVERSITY HOUSING

Please select one of the following options:

I do not grant permission for the participant to stay overnight in University housing.

I grant permission for (print participant's name) _____ to stay overnight in University housing with (print student chaperone's name) _____ following the program or activity listed above on this form.

I understand that overnight housing is not a formal component coordinated by the program and that the program staff is not responsible for supervising the participant in overnight housing. I understand that the student chaperone listed on this form is solely responsible for providing supervision of the participant staying with them in overnight University housing.

(Please print):

(Parent or legal guardian)

Signature: _____ Date: _____

MICHIGAN STATE UNIVERSITY MEDIA RELEASE FORM

Participants in MSU-sponsored programs and activities may be photographed and videotaped for use in MSU promotional and educational materials. The participants are not identified by name in the materials.

I authorize MSU to record the image and voice of the subject named below and I give MSU, and all those acting with MSU's approval, all rights to use these images and voice recordings. I understand that such images and/or recordings may be used for educational and promotional purposes. This authority extends to all conventional and electronic media, including the Internet and any future media, and to any printed material.

I understand and agree that these images and recordings may be duplicated, distributed with or without charge, and/or altered in any manner without compensation or liability, in perpetuity.

Print subject's name: _____

Signature of Parent/Guardian of minor participant or of participant aged 18 and up:

_____ Date: _____

_____ Date: _____