San Diego County High School Mock Trial Program/Competition 2024-2025 Participation Agreement/Photo Release (Minor Student)

(Student's name) _______ ("Student") from ______ High School has my permission to participate in the 2024/2025 San Diego County High School Mock Trial Program/Competition (the "Competition") season occurring between September 6, 2024 and February 25, 2025. My student and I have reviewed and understand the rules, guidelines, and expectations for the Competition. We acknowledge that participation during the Competition season and the Competition taking place on February 6, 11, 19, 22 and 25, 2025 is completely VOLUNTARY.

Release and Covenant Not to Sue/Photo Release

I, as the parent/guardian of Student, hereby give permission and authorize the San Diego County High School Mock Trial Committee and/or its assignees to take and/or receive from me photographs and video of my minor child participating in the Competition, and to use or reuse the images so taken or provided in print or publication in any medium or form, including but not limited to electronic form on the San Diego County High School Mock Trial Committee's website, for any length of time, for promotional, illustrative, or civic and education program purposes. By this authorization, I understand that the above activities will not result in any profit, and that neither I nor Student shall receive any fee or compensation for same, and that all rights, title, and interest to the images and use of them belong to the San Diego County High School Mock Trial Committee.

I, as the parent/guardian of Student, acknowledge and understand the following assumption of the risk: (1) participation in the Competition includes possible exposure to and illness from infectious diseases; (2) I knowingly and freely assume all such risks related to illness and infectious diseases, even if arising from the negligence or fault of the San Diego High School Mock Trial Committee or the San Diego Superior Court; and (3) I hereby knowingly assume the risk of injury, harm, and loss associated with the Competition, including any injury, harm, and loss caused by the negligence, fault, or conduct of any kind on the part of the San Diego High School Mock Trial Committee or the San Diego High School Mock Trial Committee or the San Diego High School Mock Trial Committee or the San Diego High School Mock Trial Committee or the San Diego Superior Court.

In consideration for this participation, I hereby release and agree to indemnify and hold harmless the San Diego High School Mock Trial Committee, the San Diego Superior Court, and/or any other program organizer(s) and/or sponsor(s), including their officers, agents, judges, employees, and volunteers, from any and all liability and responsibility for any claim or cause of action on account of any injury, damage, expense, or other loss in any way associated, directly or indirectly, with the participation of Student in the Competition.

Parent/Guardian Signature:

Date:

Authorization for Medical Care

Health: Medical or Other Special Needs. Indicate below as applicable:

- □ My child has NO special needs the staff should be made aware of.
- D My child has special needs and instructions are attached. Please advise of any allergies etc.
- \Box Other:

I authorize/agree to my child receiving any emergency medical services deemed necessary by those in charge of the Mock Trial Competition. I understand and agree that any resulting expenses will be my responsibility as their parent/guardian.

Parent/Guardian Name (please print):			
Address:			
City:	Zip:	Cell Phone:	
Medical Insurance Company:	Policy Number:	Group Plan:	
If I cannot be reached in case of emergency, please notify:		Cell Phone:	
Parent/Guardian Signature:		Date:	