



Virtual Logic and Leadership Summer Program Parent Permission, Materials Release & Release of Liability

Please fill out all the information below, read through the document completely, and follow the steps to finalize your eSignature. Student(s) cannot participate in the virtual summer program or personalized one-on-one success coaching web calls unless this form is filled out by a parent, guardian or legal representative. Any questions can be directed to Team@LeadAZ.org

Child(dren) and Parent, Guardian or Legal Representative Information

Child 1 Name:	_____	Parent Name:	_____
Child 2 Name:	_____	Email:	_____
Child 3 Name:	_____	Primary Phone:	_____
Child 4 Name:	_____	Secondary Phone:	_____
Program/Date:	_____		

The undersigned parent, guardian or legal representative (parent) hereby consents to the participation of their child(ren) (named above) in the Logic & Leadership Virtual Academy. It is understood that this will be under the supervision of (a) Leadership Society of Arizona (LSA) staff from the dates designated in the product purchased.

For and in consideration of the student being allowed to participate in this program, and other valuable consideration, the undersigned parent, on behalf of the student and the student's parents or personal representatives does hereby release and hold harmless Leadership Society of Arizona, its agents, volunteers or associated partners in this program. The undersigned assigns any loss or damage on account of any injury to the person or the personal property of the student, caused by perceived negligence or otherwise, while the student is engaged in the above-named activity. The undersigned expressly agrees that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of Arizona, and that if any portion of this agreement is held invalid, it is agreed that the balance shall; notwithstanding, continue in full legal force and effect.

The undersigned parent grants permission to LSA staff and volunteers to contact their child(ren) (named above) via phone, email, text message, or online communication throughout the duration of the program specified by the product(s) purchased. The undersigned acknowledges LSA's student confidentiality policy and accepts that no information will be disclosed without the child(ren)'s permission unless LSA staff believe that the child(ren)'s safety, well-being, or health are at risk. The undersigned acknowledges LSA's child protection policy that all communications between the child(ren) and staff member(s) will be documented for the protection of the child. The undersigned parent will be given an update on their child(ren)'s progress at the end of the program, but these updates shall not violate the confidentiality policy. Parents reserve the right to request notification any time LSA schedules a meeting (in person or virtual) with their child(ren).

The undersigned parent request that my child(ren) (named above) be allowed to participate in the described activity. I further acknowledge that I am authorized to enter this agreement on behalf of the student, and/or the student's parents, personal representatives, assigns, heirs, and next of kin.

The undersigned parent, guardian, or legal representative grants permission and consent for the aforementioned child(ren) to allow photographs and videos to be taken during virtual program session activities. I further give permission and consent that any such photographs or videos may be published and used by Leadership Society of Arizona, its agents and associated partners, to illustrate and promote the experience of LSA's programs or their affiliate partners. The undersigned parent/guardian/representative may submit a written request to LSA staff to request that photographs and videos are not take of the aforementioned child(ren). In this instance, the student(s) will be asked to refrain from participating in any group pictures or videos.

The undersigned, indicate that I have read this document and provide my consent for program participation for the aforementioned child(ren) and I represent that I am at least eighteen (18) years of age and am fully competent to sign this Release.

Print Parent/Guardian/Representative

Parent/Guardian/Representative Signature

Date