Student Name _____

RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS. PERMISSION TO USE PHOTOGRAPH AND VIDEO

Please use one form for each student.

Activity: ROV Workshop
Activity Location(s): McComb Sports Park, 701 South Magnaolia Street, McComb, MS 39648

Iam the parent or legal guardian of the Attendee. **I understand the legal consequences of signing this document, including (a) releasing STEM Advancement Inc, dba Mississippi Robotics from all liability on my and the Attendee's behalf, (b) promising not to sue on my and the Attendee's behalf, (c) and assuming all risks of theAttendee'sparticipation in this Activity, including travel to, from and duringtheActivity.** I allow Attendee to participate in this Activity. I understand that I am responsible for the obligations and acts of Attendee as described in this document. I agree to be bound by the terms of this document.

I grant to STEM Advancement Inc, dba Mississippi Robotics the right to take photographs and video of me and my family in connection with any sponsored event. I authorize STEM Advancement Inc, dba Mississippi Robotics its assigns and transferees to copyright, use and publish the same in print and/or electronically, including the Internet and social media.

I agree that STEM Advancement Inc, dba Mississippi Robotics may use such photographs of me and my family with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Ihave read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made by me.

_____ Date _____
Print Minor Student Name (if applicable)

_____ Phone _____
Print Name of Adult or Minor Parent/Guardian

_____ Date _____
Signature of Adult or Minor Parent (Guardian)