



Participation and Media Release

I am the parent or guardian of the student whose name appears above and I have authority to make legal decisions for the benefit of this child.

I recognize that work-based learning opportunities of this nature have a risk of lost or stolen property, injury or even death during transportation to, from, on-site, and during the activities.

I, on behalf of the child and for myself, waive any and all claims of liability arising from the child's participation in this opportunity, including claims against the following parties (and their employees, contractors and volunteers): Iowa Lakes Community College, the school and school district that the child and the employer who hosted the work-based learning opportunity.

I agree to defend, hold harmless, and indemnify Iowa Lakes Community College, the school and the school district that the child attends, and the employer who hosted the trip (and their employees, contractors, and volunteers) from and against all claims of liability that derive from claims that I or my child make against any other parties from this work-site opportunity.

I give my consent to have Iowa Lakes Community College staff member contact my son or daughter at some future date to review their career development.

Media: I agree to allow my child's photograph, video tape or motion picture image that includes his/her name or likeness or any recording that includes his/her voice to be used in marketing materials to promote the Iowa Lakes Community College Intermediary Network program. I understand that my child's photo/image will only be used in a positive manner in publications, print advertising, promotional materials or any other medium to inform others about the career exploration activities coordinated by the Intermediary Network program and the school districts.

Yes – I will allow my child's image/comments to be used by Iowa Lakes Community College.

No-- I will not allow my child's image/comments to be used by Iowa Lakes Community College.

I understand transportation to and from all job shadows is the responsibility of the student or parent. Connect @ Iowa Lakes will not provide transportation. (Please initial on the line)

Students Name: _____ School _____

Parent Signature: _____ Date _____