

Consent, Waiver, Release, and Assumption of Risk for Youth Participants
Kansas State University: K-State Debate Camp

Name of Participant: _____

Birthdate: _____ Age: _____ Expected High School Graduation Year: _____

Address: _____
Street Address City State Zip Code County

Parent or Guardian Name: _____

Address (if different from above): _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Please list all adults with legal custody of your child: _____

For more information and details about the K-State Debate camp (“event”), please visit: <https://www.k-state.edu/debate/camp.html>

Please specify any accommodations that your child will need to participate in this event: _____

In consideration of my child being allowed to participate in the K-State Debate camp hosted by Kansas State University, through K-State Debate and the Department of Communication Studies, I, the undersigned parent or guardian, agree on behalf of myself and my child to grant permission for my child to participate in the event and further agree as follows:

- I and my child agree that we must conduct ourselves in a manner so as not to substantially disrupt or interfere with others’ event participation(s), in accordance with the conduct standards generally expected of University students (such as the [Student Code of Conduct](#), [Threat Management Policy](#), and [Anti-Discrimination and Harassment Policy](#) (all available via www.k-state.edu/policies)), and any additional safety or conduct directives provided by staff, including those related to COVID-19. I understand if my child fails to comply with applicable rules or behavioral standards, my child is subject to disciplinary action, including but not limited to being removed from the event, no refund provided.
- I understand that as the parent/guardian I am responsible for—and must closely monitor—mine and my child’s use of any technology related to this event, any interactions related thereto, and information shared. This event will be delivered via the following methods: **In person**. I agree that I shall not copy, reproduce, share or otherwise distribute in any way any images or personal information of any other participant or person involved in the event.
- For my child and myself, I WAIVE, RELEASE, AND DISCHARGE Kansas State University, the State of Kansas, the Kansas Board of Regents, and all their agents, officers, and employees, from all claims, demands, and causes of action of any kind, including claims for negligence, invasion of privacy and/or any other claim, which may arise from or be related to my child’s participation in the event.
- I and my child fully realize the risks associated with participation in the event, and I and my child fully ASSUME THOSE RISKS, including by way of example, but not limited to: the possibility of serious physical and/or mental trauma or injury (minimal, serious, catastrophic, death), injury arising from recommended or corresponding activities associated with the event including technology interruptions and malfunctions, disruption or publication of my image, and likeness or information by third parties.
- I also acknowledge that should I have any issue or concern about the event, I may contact local law enforcement for an emergency and contact the event coordinator with any other concerns that I may have. I also may utilize the University’s Report It website to report any non-emergency concerns I have, which is located here: <https://www.k-state.edu/report/>.
- If I provide my signature electronically, I agree it has the same validity and meaning as a handwritten, hard copy signature. I agree that I will not later claim that an electronic signature is not legally binding.

- I waive any rights to and consent to the recording and use of my child’s image and likeness by releasees. I understand and voluntarily authorize the releasees to: (1) record my child’s participation and appearance on videotape, audio tape, film, photograph, electronic data or image, and/or any other medium (collectively referred to a “Photographs”); (2) use and/or publish my child’s name, likeness, voice, biographical material, and/or other private and/or public facts and/or opinions (collectively, “Likeness”) in connection with or separate from these Photographs; (3) exhibit and distribute such Photographs and/or Likeness in whole or in part, without restrictions or limitation, for any communications, educational, marketing, advertising, publicizing, promotional, and/or any other purpose which the releasees deem appropriate. I understand and consent that my child’s Likeness and any Photographs may be posted on and/or accessible to the public via the Internet and other media. I waive any right that I or my child may have to inspect and/or approve any finished Photographs or Likeness products or the use to which it may be applied, and I understand and consent that neither I nor my child will receive financial compensation in exchange for use of the Photographs and/or Likeness. Without limiting the foregoing releases, waivers, and discharges, I (and on behalf of the successors) specifically hold the releasees harmless from any and all types of liability related to the Photographs and/or Likeness, including without limitation, for negligence or invasion of privacy of any and all types, and for damages to my person, property, and/or reputation, including without limitation damages related to any blurring, distortion, alteration, or optical illusion that may occur and/or be produced in any manner whatsoever.
- I grant my permission for my child to participate in all activities during the Camp and to ride in vehicles operated by the releases (defined below) to and from events during the Camp.
- Please list the number for a cell phone your child will have in their possession while physical attending the Camp (This is NOT mandatory. If provided, the number will be used for coordinating participants during the Camp. The numbers will be maintained and utilized only by K-State Debate Staff): (_____)_____
- In the spaces below, please provide the name, phone number, and relationship to student of any person authorized to pick your child up from camp. I understand that my child may not leave campus with any person whose name does not appear on this list of authorized persons.

Name: _____ Phone: (_____) _____ Relationship: _____

Name: _____ Phone: (_____) _____ Relationship: _____

Name: _____ Phone: (_____) _____ Relationship: _____

- All matters arising out of or related to this Consent, Waiver and Assumption of Risk (“Consent”) shall be subject to, governed by, and construed according to the laws of the State of Kansas, and jurisdiction and venue of any suit arising out of or related to this Consent shall reside only in courts located in the State of Kansas.

This Consent is a continuing consent, waiver, release, and assumption of risk with no limitations or reservations, unless and except those stated herein, and is binding on me and my child and our heirs, executors, administrators, legal representatives, assigns and successors in interest. Any copy of this document has the full force and effect and is binding as the original.

Signature of Parent or Guardian

Date