



Parent/Guardian Authorization and Release Agreement

This form must be completed and returned to the program manager prior to the program start date.

Participant Name: _____

Participant Address (City, State, Zip): _____

Program Name: _____ **Program Location(s):** _____

Program Date(s): _____

I am the Parent/Guardian of _____ (participant), who is under eighteen years of age and I _____ (parent/legal guardian) am fully competent to sign this Agreement. I give permission for Participant to participate in the above-referenced Program or Activity.

I understand that without this consent my child will not be able to participate in the program(s). If I choose to rescind my authorization and consent provided herein, I agree that I will inform UNT. I understand, however, that it may not be possible to recall any work or videos that have been published as part of the program prior to receipt of my written rescission.

I further hereby hold harmless, release and forever discharge UNT and its employees, agents, licensees and legal representatives from, and shall indemnify them against, all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators or any other person(s) acting on my behalf or on behalf of my estate have or may have by reason of my child’s participation in the program and through my authorization, consent and release herein. I have read this authorization and releaser agreement, I fully understand it, and I voluntarily agree. I represent and certify that I am the parent or legal guardian of the minor.

I certify that I have read and reviewed the camp description and I am aware of the activities that will be involved as part of the Humanities UNTamed camp activities.

I have read this authorization and release agreement and have had the opportunity to consider its terms and understand them. I verify that I have read and voluntarily agree to the terms and conditions of this agreement.

SIGNATURE OF PARENT/LEGAL GUARDIAN _____ DATE _____

PRINT NAME _____

Photo Release Agreement

I give permission to the University of North Texas and its agents, employees, licensees, or assigns to take and publish the photographs taken of Participant on the date and at the location listed above in University of North Texas publications, both printed and electronic. I waive any right to inspect or approve the finished photographs or the printed or electronic material(s) created from the photographs prior to its/their publication. I release, and hereby agree to indemnify, defend, and hold harmless the University of North Texas, its agents, employees, licensees, and assigns (the “Released Entities”) from and against any and all claims that I, or any third party, may have now or in the future for invasion of privacy, right of publicity, or defamation arising out of the publication, use, exploitation, reproduction, adaptation, distribution, broadcast, or display of the photographs.

SIGNATURE OF PARENT/LEGAL GUARDIAN _____ DATE _____

PRINT NAME _____