# Student Release Form

## **STAMP - Student & Teen Adventure in Mission Preparation**

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Öæe^Át-ÁÚ¦[\*¦æ; kÁÁÁ´´´´´´

Person to contact in event of an emergency:

Program Description: STAMPÁ§ c[ |c^•Á, |^å[ { ā æ) d^ Á& æ• |[ [ { Á§ • d` &cā } E & č, ā | Áæ • [ Á§ & č Å  $[+*\alpha]$   $\tilde{a}^{\dot{a}}$   $\tilde{E}^{\dot{a}} ]^{\dot{a}}$   $\tilde{a}^{\dot{a}}$   $\tilde{A}^{\dot{a}}$ Ô@¦&@\$ee)åÁÙ&@[[|Ê55484]\*Å@\*Á\*^{}}æeã{{Áee}åÁ;`då][¦A,|æ\*+|[`}åÁee}åÁ][¦o•Áæ+|å•Ê5ee}åÁU`coÁU`cc æ Á Ô ã Ć Á Q | æ à Á J æ \ ĎÁÁ Á

Consent to Participate: Á0x læ) cá ^l{ a • a } Át lá ^ Ás@a át á æda a æ^ ás á@ ÁSTAMPÁ l[\* læ; Á å^•&¦āa^åÁæà[ç^ÊÁ\$}&|ĭåā]\*Áæ|Áæ&cã;ãæ?•Á ČÓ&®@Áæò^Á;¦\*æ)ã^åÁæ}åÁ`]^¦çã^åÁà^Á©AÁ`CAMPÁcæ-ÈĂ QX } å^ !• @ a Å a å Å a å Å a å Å [ a å a å ] Å [ l Å Å & @ a å Å [ Å a æ Å Å Å & @ [ l Å \* • Å A c ^ ^ } Å DEÓY Ò Å P ^ æ \* ` æ c \* !• Å  $\tilde{a}$   $\hat{A} \sim \hat{A} \sim \hat{A} = \hat{A} + \hat{A} + \hat{A} = \hat{A} + \hat{A} + \hat{A} = \hat{A} + \hat{A} + \hat{A} = \hat{A} + \hat{A} = \hat{A} + \hat{A} + \hat{A} + \hat{A} = \hat{A} + \hat{A} +$ Ôãc ÁQ |æ) åÁÚæ\Á§ ÁPæ¦ã à` ¦\*ÉÚ^}}•^ |çæ) ãæke) åÁsæ&\Ást æ‡ Ékeksã œ) &^ Á –Á €Á ‡^• Á[`}åÁ da Át Á ælaða ær Át ÁSTAMP ÉÁDÁ } å^ + cæ) å Ás@æcÁ@ Á &@ [|Át + Át Á, } ^ å Át ÁÓat |^ ÁÓæ] cæ dÔ@ + &@ÉA Ù@ă^{´aa)•d[`} Ása) åÁ āllÁsı^Ásl¦ãç^} Ásı^Ása/Ása/Ása> •^åÁsa) åÁsi •`'\^åÁ &@[[|Ási`•Ásl¦ãç^¦ÈÁ Á

Medical Release: A (24) + A&@ajaÁæjaÁvç^¦^Á~-[¦ơᢤajlÁsĺ^Á; záa^Á; ¦Á@a Đ@;|Á ze^ĉĚXP[ (^ç^¦Ě4X) a^!•cza)aÁv@zeŹwzŠ&ãa^}o•As[Aj&&`lÉA  $^{(+)} \otimes \hat{E}_{a} = \hat{E}_{a} =$ Üæî Á ¢æ[ā]æaā] } LÁ ^å a&ædÉ&^} œdÉA ¦Á` ¦\* a&ædÁsāæ\* } [•ā LÁS^æ(^} dÁe) å Á@•] aædÁ&æ?^Áæåçã ^åÅe) å Á •`]^¦çãr^åÁsì^ÁseÁ,@•ã&ãæà;ÉÁ`¦\*^[}ÉÁ,¦Ásì^}cã:cÁQae,Ása]]¦[]¦ãæe^DÁjã&^}•^åÁş[Á,¦æ&cã&^Á}å^¦Ás@,Áæ;•Á,-Á  $c@Acae^A @^{Acae}A @^{Acae}A^{Ac} = \frac{1}{2} a^{Ac} + a^{Ac} + a^{Ac} = \frac{1}{2} a^{Ac} + a^{$ Á

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Any medication the child is currently taking or anything else the instructors should know (please

provide in prescription or OTC container and include dosage, frequency, and special instructions):

#### Waiver of Liability

I, the undersigned parent and/or guardian of said child do hereby waive and release, indemnify, hold harmless and forever discharge ABWE and its agents, employees, activity leaders, and volunteers of and from any and all claims, expenses, causes of action, lawsuits, damages and liabilities, of every kind and nature, whether known or unknown, in law or in equity, that I ever had or may have, arising from or in any way related to the participation of my child in any of the events, transportation to and from, and/or any other activities related to ABWE, provided that this waiver of liability does not apply to any acts of gross negligence, or intentional, willful, or wanton misconduct.

#### **Consent to Photograph**

I agree to allow ABWE to take, use, and reproduce any photographic image of said child taken while participating in any ABWE-sponsored programs or activities. These images may be used in promotions or other related marketing materials.

### I have read, understood, and fully agree to the above:

Parent/Legal Guardian Signature:	
Date:	
Parent/Legal Guardian Signature:	
Date:	
Youth Signature:	_
Date:	