



Oregon Envirothon Parental Consent Form

Dear Parent/Guardian:

We are excited for your student to participate in Oregon Envirothon at the Oregon Garden. The Oregon Forest Resources Institute (OFRI) is the organizing host. It is the utmost importance to the Oregon Envirothon committee and OFRI that we provide a safe and fair event for all participants. In case of an emergency, the law requires that parental permission be obtained for medical procedures on minors (under age 18) and for the taking of pictures of minors. Please sign the following consent form. Thank you.

School/Group name: _____

Student name: _____

Mailing address:

Parent/guardian name: _____

In case of emergency, please list any numbers where parent/guardian can be reached:

Please provide any important medical information.

Allergies (food, drugs, insect, etc.)

Special medical concerns or conditions

PHOTOGRAPHY AUTHORIZATION AND RELEASE

I hereby grant the Oregon Envirothon and Oregon Forest Resources Institute (“OFRI”) permission to use, publish or display my minor child’s likeness in any photographs and any reproduction thereof or any video or voice recordings in any of their publications, without payment or any other consideration. I understand and agree that such materials will become the property of Oregon Envirothon and OFRI and will not be returned. I hereby irrevocably authorize Oregon Envirothon and OFRI to pre-prepare, edit, alter, copy, exhibit, publish or distribute the photographs or video or voice recordings for purposes of publicizing programs of Oregon Envirothon and OFRI, or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written, audio or electronic copy, wherein my minor child’s likeness or voice appears. I also give permission to Oregon Envirothon and OFRI to use my minor child’s grade level in school, school name and school location as an accompaniment to the photo, video or voice recording. I hereby hold harmless, release and forever discharge Oregon Envirothon and OFRI from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate may have by reason of this authorization.

I have read this authorization and release before signing below and I fully understand its contents, meaning and impact.

I, the undersigned parent/guardian give permission to the Oregon Envirothon/Oregon Forest Resources Institute, to perform such diagnostic therapeutic and/or operative procedures for him/her as deemed necessary and refer him/her to a physician as deemed appropriate. I further give permission to have my son/daughter treated by a physician who will perform any diagnostic, therapeutic and/or operative procedures as deemed necessary.

Signature of parent/guardian of minor:

Date of signature: _____