

MINNESOTA ACADEMY OF SCIENCE

Science and Engineering Fair / Junior Science & Humanities Symposium

All forms due by March 5, 2012

Parental Consent & Media Release – March 18-March 20, 2012

Section I - Parental Consent and Payment Confirmation

My child, _____, has my permission to attend the Minnesota Academy of Science (MAS) State Science & Engineering Fair and/or JSHS.

I understand that my child must be chaperoned at all times. I understand that I must give the name of the adult chaperone to MN Academy of Science. The name of my child's chaperone is _____ and the Regional Science Fair Director is: _____.

I understand that my child is expected to attend all the scheduled events. Should my child depart from the program in an unauthorized manner, the MAS will not be responsible for any unforeseen complications. In addition, I agree to pay the transportation costs to send my child home. I understand that the event may include travel by bus or other commercial transportation.

NO registration will be considered complete until paid. NO students will be allowed to present until their registration is paid in full. I (we) understand that if I (we) are paying for the registration(s) and do not pay it on time, a \$30 late fee per registration will be charged. If my (our) registration(s) will be paid by a school, district or other 3rd party, I (we) are still responsible for its payment. If MAS has not received payment from the 3rd party by the time the event starts, I (we) will need to pay for the registration(s) at the door, to be reimbursed once MAS receives the 3rd party payment.

Section II – Media Release - Authorization for Release of Photographs, Videotape or Film

I (we) hereby consent, authorize and assign any and all rights to MAS, its agents, officers, employees and all other persons or entities to whom release or circulation may be made including news and media organizations to use, reproduce, distribute, exhibit or broadcast photos, videos, film and audio recordings (whether or not edited, retouched, altered or otherwise changed or modified) of me and/or my child, children, products(s), group or organization which I represent, which were taken at the MAS State Fair/JSHS for use in publicity releases.

I (we) further consent and authorize the above and others to release or circulate the same in any manner for any and all purposes in any form with or without my name or the name of my child, children, products(s), group or organization or other identification or the names of others covered by this release. I (we) understand the photos, videos, film and/or audio recordings will be viewed by the general public and that other use may be made of them.

I (we) further agree and consent that the MAS and others are not responsible for any misappropriation of the photos, videos, film and /or audio recordings by any member of the general public or anyone else. I (we) have read the foregoing release, authorization and agreement before signing below and I warrant that I (we) fully understand the contents thereof.

| | |
|-----------------------------------|---------------|
| Full Name of Parents or Guardians | |
| Street Address | |
| Day Phone | Evening Phone |
| Signature of Parent or Guardian | Date |
| Local Newspaper | Email |

Section III – School Authorities Consent

| | |
|--|------|
| School Name/Address | |
| Name of Principal or School Official | |
| In consideration of the advantages to be derived from participation in the Minnesota Academy of Science State Fair and/or JSBS, I hereby authorize this student to be absent from school for this purpose. | |
| Signature of Principal or School Official | Date |

Confidential Medical/Emergency Notification

| | | |
|--|--------------------------|------------|
| Student First Name | Middle Name | Last Name: |
| Birth date | Gender: M F | SSN |
| Home Address | | |
| Home Telephone | | |
| Date of Last Tetanus Shot | Drug Allergies | |
| Physician | Physician's Phone Number | |
| Medical Conditions, Previous Surgery | | |
| Regular Medications | | |
| Special Dietary Requirement (include food allergies) | | |
| Special Physical Needs | | |

Family Information

| | | |
|------------------------------------|-----------|---------------|
| Emergency Contact | Day Phone | Evening Phone |
| Relationship to Student | | |
| Medical/Hospital Insurance Carrier | Policy # | |

Consent to Medical Care and Treatment

| | |
|---|------|
| <p><i>[Parental consent is required before a hospital's emergency department can give medical treatment to a minor. Every effort will be made to contact parents, but a completed consent form will expedite treatment.]</i></p> <p>I hereby authorize and consent to the administration of all medical and/or surgical treatment(s) to my child by a licensed physician or hospital in the event I am not available to consult with the attending physician(s), attempts to contact me have been unsuccessful, and the attending physician(s) deem it advisable to proceed with such treatment(s).</p> | |
| Signature of Parent or Legal Guardian | Date |

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MAS Student Code of Ethics

Point of Information from the Program Committee: Over the last five years we have observed a growing level of tension in the area of sportsmanlike conduct at times of MAS competitions. We want to insure that the spirit of science competition emphasizes the joy and fun of applied science, as well as the importance of basic human dignity.

The Program Committee feels that conflict could be reduced by adherence to a Code of Ethics by which all participants (young scientists, parents, judges, and coordinators) are bound. We have researched codes of ethics from various organizations that work with youth competitions. We have modeled the following after the National Youth Sports Coaches Association and that of the International Science and Engineering Fair. All judges decisions are final.

MAS Ethics Statement for Science Competitions: Scientific fraud and misconduct are not condoned at any level of research or competition. Plagiarism, use or presentation of other researcher's work as one's own, forgery of approval signatures and fabrication or falsification of data or approval dates will not be tolerated. Fraudulent projects will fail to qualify for competition in affiliated fairs.

Student Code of Ethics

- I hereby pledge to be positive about my science experience and accept responsibility for my participation by following this *Student Code of Ethics Pledge*.
- I will encourage sportsmanship from fellow scientists, coaches, officials, and parents at every event by demonstrating good sportsmanship.
- I will do my very best to listen and learn from the judges and scientists.
- I will treat my advisor, other participants, officials, and visitors with respect regardless of race, sex, creed, or ability. I will expect to be treated accordingly.
- I deserve to enjoy the event and will alert parents or advisors accordingly.
- I deserve to compete in an environment that is free of drugs, tobacco, alcohol, and expect adults to refrain from their use at all science events.
- I will expect to receive a fair treatment.
- In the event that I wish to file a formal complaint about something which has happened at the competition, I will follow official MAS complaint procedures.

Complaint Procedures

Contact the SF/JSHS Director about incidents through the MAS HQ at the event or the MAS office after the event.

| | |
|---------------------------|------|
| Student Name | |
| Student Signature | Date |
| Parent/Guardian Signature | Date |

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Student Waiver, Indemnification and Release of Liability

The undersigned understands and agrees that in consideration for receiving permission to participate in the Science and Engineering Fair (MSSEF) and/or Junior Science & Humanities Symposium (JSHS), I hereby release, waive, discharge and covenant not to sue the Minnesota Academy of Science, its directors, officers, employees, contractors, servants, or volunteers (RELEASEES) from any and all liabilities, claims, demands, causes of action, injuries (including death) or damages, including court costs and attorneys fees, that may be sustained by me while traveling to or from, or attending and/or participating in the Science and Engineering Fair or Junior Science & Humanities Symposium.

I further agree to indemnify and hold harmless the RELEASEES from any and all liabilities, claims, demands, causes of action, injuries (including death) or damages, including court costs and attorneys fees, which may occur to me, other participants, third-persons, or attendees, whether caused by my negligence, the negligence of others, or accident.

I understand that the RELEASEES do not provide insurance coverage for any circumstance arising from my child's or my participation in the MSSEF and/or JSHS or any event or activity related to the MSSEF and/or JSHS. As such, I agree that I have reviewed my personal insurance coverage and find it adequate.

It is my express intent that this agreement shall bind the members of my family and spouse, and my heirs, assigns and personal representatives, and shall be governed by the laws of the State of Minnesota.

By signing this Waiver, Indemnification and Release of Liability, I state and represent that I have read it, understand it and the conditions set forth herein, that I agree to all conditions set forth herein, and that I sign it voluntarily.

Name of Student: _____ DATE _____

Student's Signature

Parent/Guardian Signature

Please fill out the name of each of the student's chaperones and their cell phone numbers.

Chaperone _____ cell phone _____

Chaperone _____ cell phone _____

This waiver must be signed and submitted for EVERY adult and student
who will be attending the State Science & Engineering Fair
and/or the Junior Science & Humanities Symposium.

**Participants will NOT be allowed to compete or participate in any activities
unless we receive a copy of this signed form.**