Waiver of Liability and Release
2024 Idaho Journalism Workshop

PLEASE READ THE FOLLOWING CAREFULLY. If you have any questions, have them answered **before** signing this document.

      In consideration of my child being permitted to participate in the *2024 Idaho Journalism Workshop*, I, _____, in full recognition and appreciation of the dangers and risks inherent in such participation in activities, do hereby waive, release, and forever discharge Idaho Journalism Workshop, its proprietors Jake Lee & Aubrey Nelson, my child's School District and its agents and employees from and against any and all claims, demands, action, or cause of action for costs, expenses or damages to personal property or personal injury, which may result from participation in these activities.

I understand and admit that my child's participation in the *2024 Idaho Journalism Workshop* is voluntary. I assume full responsibility for any injuries or damages resulting from my participation in this workshop including responsibility for using reasonable judgment in all phases of participation in the workshop, travel to and from workshop locations and attendance in workshop functions including, but not limited to, recreational functions. I recognize and understand that my child's participation is solely at my own risk, and that I assume full responsibility for any injuries and damages to my child.

I affirm that my child is in good health. I further declare that my child is physically fit and capable to participate in workshop activities. I acknowledge that it is the recommendation of Idaho Journalism Workshop and its proprietors that I obtain general medical/health insurance for my child if he/she is not already covered. I understand that it is my responsibility to notify appropriate workshop personnel of emergency medical needs or information. I also understand that this Waiver of Liability and Release binds my heirs, executors, administrators, and assigns as well as myself.

I understand that while Idaho Journalism Workshop, its vendors, venues, agents, and otherwise, will follow local health recommendations to help prevent the spread of COVID-19, it is possible that my child may contract this virus, other viruses and/or illnesses. I affirm it is my and my child's duty and liability to be responsible for his/her health, and the health of others, by following local health guidelines.

I acknowledge that I have read and understand this entire Waiver of Liability and Release, and I agree to be legally bound by it.

_____   _____
Participant's Name   Participant's Signature

_____   _____
Name of Participant's Parent or Guardian   Signature of Parent or Guardian

_____
Date