

# Thompson School District Science Fair Registration and Permission Form

Please fill out this form in addition to the ISEF Student Checklist and Research Plan. This form is due to Carol Swalley by November 22, 2013.

Permission to participate (to be filled out by Parent/Guardian):

Transportation to and from the Science Fair is the parent or guardian's responsibility. The District cannot and does not assume any responsibility for the safety of the driver or passengers, training of drivers, condition of vehicles, adequacy for the use or purpose intended or any other matters related to any non-District transportation.

Participants might use hand tools, scissors, paints, markers, sewing items, wire, weights, etc. and engage in strenuous activities while working on a project. While accidents and injuries are rare in the program, there is a risk of injury to participants while performing an experiment. No amount of instruction or precautions will totally eliminate all risk of injury. Parents must supervise their child while performing the experiments possibly required by the student's chosen project. Participants have the responsibility to help reduce the risk of injury by participating in the activity in a safe and effective manner. Participants must complete and submit all required paperwork **before** beginning an experiment.

**Please complete and return the bottom portion of this letter**

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My child, \_\_\_\_\_, has my permission in the district Science Fair on January 11, 2014 at Loveland High School.

School Name: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Category: \_\_\_\_\_

Your signature acknowledges that your child is being allowed to participate in the Science Fair with the understanding that you accept the risks involved and will supervise your child during the event. You agree to indemnify and hold the Thompson School District R2-J, their officers, employees, volunteers, and agents harmless from all loss, costs, damage, injury, liability, claims and causes of action whatsoever, arising out of or related to participation in this field trip/activity. Nothing in this Agreement shall be construed as a waiver by Thompson School District of any rights, immunities, privileges, monetary limitations to judgments, or defenses provided to Thompson School District by the Colorado Governmental Immunity Act, Sec. 24-10-101 et seq., C.R.S., as from time to time amended, or otherwise available to Thompson School District.

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian      Date

Please provide your contact information:

Work/Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_