

Jefferson County Extension Service, 810 Barret Avenue, Louisville, KY 40204-1782
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**Permission to Participate
District 3 Teen Retreat
January 15 – January 16, 2010**

I give permission to my child, _____, to attend and participate in the District 3 Teen Retreat (January 15-16, 2010.) I understand that activities may include, but are not strictly limited to the following activities: business meetings, sporting events, teamwork games and activities, leadership games and activities, communications games and activities. Participation in the District 3 Teen Retreat is designed to expose 4-H members to new skills and experiences and to enable participants to be challenged to try new ideas and activities in a safe, nurturing and supportive environment. They will be encouraged to learn new skills, expand their boundaries and then implement their skills through a variety of leadership experiences.

I am aware and have discussed with my child that:

- Participating in activities or programs in an unsupervised or unsafe manner may result in injury;
- Other participants may act in a negligent manner which may result in harm to themselves or others;
- While driving or being transported to the District 3 Retreat, my child may be in a collision with another automobile, person, animal or object which may result in harm;
- Certain risks associated with outdoor activities could occur, including but not limited to, such as poisonous plants, stinging and/or biting insects, wild animals and reptiles.

I recognize that the above outlined activities and potential resulting risks may cause harm, accident, loss, injury or death to participant or other persons in the immediate vicinity. I have discussed with my child the importance of following directions and prescribed safety procedure, which will be outlined by the 4-H professionals and volunteers prior to and during the activities. I have also advised my child to follow posted directions and instructions at and during 4-H meetings, activities, and scheduled events.

I understand that my child is not required to participate in all activities in order to participate in the District 3 Teen Retreat but grant permission for him/her to do so, and to participate in all activities and learning opportunities despite the possible risks. I recognize that by participating in these activities, as with any physical activity, my child may risk potential injury. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity and that I assume any expenses that may be incurred in the event of a loss, an accident, illness or other incapacity, regardless of whether I have authored such expenses.

4-H Members Signature

Date

Parent/Guardian's Signature

Date

