



*Dear Parent or Guardian,
Please read the information, then sign and return both sides of this form by **Friday, August 25, 2017**. Mahalo!*

OFF-CAMPUS ACTIVITIES

Your student will be going on various field studies/trips throughout the year. SEEQS educational activities include designing and implementing hands-on projects and may include field studies and other off-site visits during school hours (and, on occasion, before or after school hours). These activities and locations include, but are not limited to: trips to mentor worksites, locating and picking up project materials from local vendors, publicity, presentations, performing community service, participating in public forums, and delivery of products produced by the students.

Transportation to and from such activities may include hired buses (operated by a licensed bus driver) or vans (operated by trained and approved SEEQS staff), walking, or public transportation. Reasonable care will be exercised by accompanying staff members in the matter of safety while chaperoning students.

Prior to each field study, you will be provided with notice of the trip by email and/or paper notice, which will include the details of the transportation, location, and hours away from the SEEQS campus. Please check your email from SEEQS daily (pay particular attention to the weekly newsletter sent on Fridays), as well as check with your child for any notices sent home for details of such trips. If you have any objections to your child's participation in a particular field trip, please notify the office via email, phone, or in person immediately, and prior to the trip's commencement.

Description of Activity:

All Requested Travel for SEEQS PCS Activities and Functions as described above.

I hereby approve my child's participation in all travel activities and functions at SEEQS as described above. I expressly agree that actual notice of such trips shall be delivered to me via email and/or via hard copy through my child and it is my responsibility to review such documents for any specific details. I expressly waive any and all claims against SEEQS, State of Hawaii, the advisors, or other school representatives on account of any accident, injury, illness or other damage that may be incurred by said student or said student's property in connection with, or related to her/his attendance at any of the above mentioned activities, including travel to and from, or in connection with, said activities.

I hereby approve my child's attendance to all requested activities and functions of SEEQS under the terms of this waiver.

STUDENT NAME (first and last): _____

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____



MEDIA RELEASE

This form grants SEEQS: the School for Examining Essential Questions of Sustainability for any purpose connected with promoting the purposes and goals of SEEQS, but not for commercial exploitation; the right to use the Participant's name, voice, and likeness in any writings, photographs, films, and recordings of the Participant while he or she is participating in the Activities; and any biographical information submitted by the Participant to SEEQS; and to use, reproduce, publish, and distribute the same.

PHOTO/VIDEO Release:

Please select **ONE** option.

- I grant permission for use of my child's **image** in print, video and/or digital media. I understand that my child's image may be used or released by the SEEQS without additional notification.
- I only grant permission for use of my child's **image** in print in the school yearbook.
- I deny permission to use my child's **image** for display, publication or release to external organizations.

NAME Release:

Please select **ONE** option.

- I grant permission for my child to be **identified by name** on the school or district's Internet websites.
- I only grant permission for my child to be **identified by name** in the school yearbook.
- I deny permission for my child to be **identified by name** on the school or district's Internet websites.

As the parent/guardian of the below listed student, I have read and understand the Student Publication/Video Release Form. I understand that this release is designated primarily for students under the age of 18 years, for the educational purposes.

STUDENT NAME (first and last): _____

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____