

**2022 GOVERNOR'S SCHOOL
PERMISSION/ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM
Parents/Guardians: Complete and submit with Registration Form.**

Student's Name: _____
Last First MI

Date of Birth: _____
Month/Day/Year

By signing this document below, I certify that I am the parent or legal guardian of the above-named student enrolled in North Carolina Governor's School, or if over 18, I am the above-named student.

By signing this Agreement, I acknowledge that I understand that participation in Governor's School and related activities involves the risk of exposure to communicable diseases, including COVID-19, as well as personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and standards of conduct.

I understand that the risk of exposure to disease or potential physical injury while on Governor's School campuses may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NCDPI employees, agents and representatives, volunteers, program participants and their families and/or any other individual who may be present upon school property or in attendance at any school activity.

On behalf of myself, my child(ren), and my spouse/co-parent of our child(ren), I voluntarily assume these risks and accept sole responsibility for any related illness or injury to my child(ren), myself and any member of my family, as well as any damage, loss, claim, liability, or expense, of any kind, that I, my child(ren) and/or members of my family may experience or incur in connection with my child(ren)'s attendance in activities or participation in Governor's School programming ("Claims"). I will advance no Claim and I hereby release, covenant not to sue, discharge, defend, indemnify and hold harmless the NCDPI, its employees, agents, and representatives, and those of the host institutions (Meredith College or Winston-Salem State University), of and from any Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of NCDPI, its employees, agents, and representatives, and those of the host institution.

A legal parent's/guardian's completion and submission of this Agreement and other registration forms are required for student attendance at the 2022 North Carolina Governor's School. Additionally, it should be noted that the laws of the State of North Carolina provide for numerous immunities for schools should something occur to a student or to the family of a student because of activities on school property. In addition to this Agreement, these immunities remain intact.

In addition to signing at the bottom of this document acknowledging your understanding and agreement to the above, please read and initial the following statements to

acknowledge your understanding and agreement with those statements.

In the event of an accident or illness, students may need to leave campus to seek medical attention. For these medical needs, Governor's School will transport students in a secured rental vehicle

_____ *I certify that I have read and understand this information, and I give Governor's School personnel permission to transport my child off campus in a leased vehicle in the case of a medical need.*

Based on the COVID-19 Governor's School Mitigation Plan, all students and staff/faculty must submit a negative PCR/Molecular test taken from 1-3 days prior to arrival on campus. Students will also participate in diagnostic testing based on the appearance of symptoms. If a student is positive, they will need to be picked up for their isolation period. A student may return to campus based on CDC guidance and the Mitigation Plan. Close contacts will be determined and monitored for symptoms, and well-fitted masks will be required of close contacts. Unvaccinated close contacts will be tested and need to leave campus for quarantine purposes. Please see the COVID-19 Mitigation Plan for details.

_____ *I certify that I have read and understand the Governor's School COVID-19 Mitigation Plan, and I give Governor's School personnel permission to administer a COVID-19 rapid test to my child as described in the Mitigation Plan.*

North Carolina Governor's School requires parents or guardians to assume responsibility for any damages to Governor's School or the host campus, Meredith College or Winston-Salem State University for which the student might be held accountable.

_____ *I certify that I have read and understand this information, and I will be responsible for any damages to Governor's School or the host campus, Meredith College or Winston-Salem State University for which my child is responsible.*

I give permission to the Governor's School to use, for nonprofit educational and promotional purposes, any photographs and audio and/or video recordings of myself or my child during participation in the Governor's School.

_____ *I certify that I have read and understand this information, and by initialing here and signing below, I am expressly releasing Governor's School, its agents, employees, licensees, and assigns from any and all claims which I may have for right of publicity, copyright infringement, or any other causes of action arising out of the use, adaptation, reproduction, distribution, broadcast, or exhibition of such materials.*

Student Signature: _____
(18 or older)

Name of Parent or Guardian: _____

Signature of Parent or Guardian: _____

Today's Date: _____