



Rotary Club of Honolulu

4-WAY TEST SPEECH CONTEST PARENT PERMISSION AND CONSENT FORM

Dear Parent/Guardian:

We welcome your child's participation in the Rotary Club of Honolulu's Four-Way Test Speech Contest and want to assure you that we are committed to making this a rich and rewarding educational experience.

As this is an off-school site, Rotary sponsored event, we are requesting that this release form be signed and returned along with your emergency contact information, permission and consent for your child to participate.

Thank you for allowing your child to participate in this speech contest event.

PERMISSION TO PARTICIPATE, YET HOLD HARMLESS

I, the parent/guardian of the student named below, hereby give my permission for my son/daughter to participate in the Rotary Club of Honolulu's Four-Way Test Speech Preliminary and, as applicable, Final Contest

I agree not to hold any of the volunteer members or employee of the Rotary Club of Honolulu responsible for any expenses or injuries that my child may incur while engaged in this activity. I understand that my child is responsible for his/her behavior at all times.

I agree that in the event of an injury, Rotary Club of Honolulu personnel in charge of this activity will make a reasonable attempt to contact me, and if unsuccessful, may act on my behalf in obtaining medical treatment for my child. I have indicated below any permanent or temporary condition that should be known about my child:

(Write "none", if applicable) _____

Signature of Parent/Guardian: _____ Date: _____

Student's Name: (Please Print) _____

High School: _____ Current grade level: _____

Parent/Guardian's names: (Please Print) _____ & _____

Signature of Parent/Guardian: _____ Date: _____

Parents/Guardians Emergency Contact Information

Emergency Contact Number(s): _____ & _____

Email Addresses: _____ & _____

Relation to Student: _____ & _____