



South Carolina Department of Natural Resources

Tournament Liability, Photo Release and Emergency Medical Form

Student's Name (print neatly) _____

Parent Name _____

Contact Number _____

I understand that my child will be subject to the same standards of conduct as they are when in school. I further understand that the school may not carry insurance relative to the program or for injuries to the student during the program, and I represent that the student has insurance either through the district's student insurance program or through my own insurance carrier. In addition, if any emergency medical procedures or treatment are required during the program, I consent to the taking, arranging for, or the procedures of treatment according to the discretion of the supervisor(s) of this program.

I release and waive all claims against the Harry Hampton Memorial Wildlife Fund, the South Carolina Department of Natural Resources (SCDNR), _____ (school name), their board, officials, agents, the individual members thereof, all employees, representatives, and all agents thereof ("Releasees"), from and against any claim which I, any other parent or guardian, any sibling, student or other person may claim to have, known or unknown, directly or indirectly, for any losses, damages or injuries' arising out of, during or in connection with my child's participation in the school-sponsored program or the rendering of medical procedures or treatment for any injuries sustained during the program.

The risk of injury from the activity of fishing could be significant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist; I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE of those persons released from liability above, and assume full responsibility for my child's participation; and, I, for myself, my child, and on behalf of my heirs HEREBY RELEASE AND HOLD HARMLESS THE Releasees WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, except that which is the result of gross negligence and/or wanton misconduct.

This authorization also allows the SCDNR the right to use, re-use, copyright, publish, and republish photographic portraits or pictures of the minor or in which the minor may be included, in whole or in part, or composite or distorted in character or form, without restriction as to changes or alterations, or reproductions thereof in color or otherwise, made through any medium at his/her studios or elsewhere, and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose. I also consent on behalf of the minor to the use of any published matter in conjunction therewith.

I warrant and represent that this release does not in any way conflict with any existing commitment of the minor. Neither the minor nor I have heretofore authorized (which authority is still in effect), nor will we authorize or permit, the use of the minor's name, picture, portrait, likeness or testimonial statement in connection with the advertising or promotion of any product or service competitive to or incompatible with South Carolina Department of Natural Resources. I hereby waive any right that the minor or I may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection therewith or the use to which it may be applied. The South Carolina Department of Natural Resources is hereby authorized to use in perpetuity and at its discretion the South Carolina Outreach & Education marketing items containing the described individual.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDING ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. As the parent and legal guardian of the above named angler, I fully understand and hereby agree to the Rules, Terms and Conditions and the Waiver and Release of Liability contained in this document. I give my permission for the above named angler to join a Youth Bass Fishing Club and compete in the associated events.

Parent or Guardian Signature (If under 18): _____ Date: _____

Emergency Contact (not a parent present at event)

Name: _____ Phone Number: _____

Does your child have any medical conditions or physical limitations we should know about?

Insurance Provider: _____ Policy #: _____