

PLYMOUTH *Writing* PROJECT

New Hampshire Chapter of the National Writing Project

Release of Liability Form

I understand and agree to the following:

My child, _____ is a student participating in the Plymouth Writing Project Summer Camp for Young Writers. Activities involved in the camp sessions will include using Plymouth State University computer equipment and taking short hikes around the campus of Plymouth State University. Participation in this writing camp requires that students have the ability to cooperate and collaborate with their fellow students, respect the equipment and facilities, and follow the instruction and guidance of the camp directors and counselors.

I understand these responsibilities and risks and permission is granted for my child to participate. I (the parent or guardian and the participant) will not hold Plymouth State University or any individual instructor or staff person in the Plymouth Writing Project Summer Camp for Young Writers, responsible for any risk involved in the program. I understand that I am liable for any and all claims and legal actions, whether for property damage, physical injury or otherwise arising from my child's participation in the program.

Parent Name(s) _____ Signature _____ Date _____

Signature of Participant _____

Photo/Media Release

I grant Plymouth State University and the Plymouth Writing Project the right to use, reproduce assign and/or distribute photographs, films, video tapes and sound recordings of my child _____ (child's name) in any materials they may create.

Signature of Parent/Guardian: _____

Printed Name of Parent/Guardian: _____ Date: _____