

Consent and Release Form

Texas Farm Bureau Student Success Series – Thrive

Student Name: _____

County: _____

Please fill out this form and complete all necessary signatures. Return a copy of this form to Texas Farm Bureau by email: youthactivities@txfb.org

I hereby provide Texas Farm Bureau permission for my child/ward ("child") to attend the Texas Farm Bureau Student Success Series Thrive program (the "Event"). I understand that the Event is in-person and will involve travel and in-person meetings. I understand that serious illness, personal injury, disability, and/or death to or of my child is an inherent risk of travel and in-person meetings. I also consent to the use and distribution by Texas Farm Bureau (the "Company") and/or any affiliates thereof of photographs, videos, or other likenesses of my child in any and all media and release the Company and any affiliates thereof from and against any liability related to its or their use, alteration or republication of any such photographs, videos, or other likenesses. I give permission for my child to be treated at a local medical facility, if necessary for emergency medical care, and I understand that the cost of any medical treatment will be at my expense.

I am aware of the highly contagious nature of bacterial, fungal, and viral diseases (collectively, "Diseases"), and that, due to the food-oriented mission of the Company, by attending the Event, my child may be exposed to (a) food, products, or commodities that are allergens, including but not limited to peanuts, berries, tree nuts, eggs, milk, wheat, soybeans, or sesame (collectively, "Allergens") and/or (b) Diseases, any of which may result in serious illness, personal injury, disability, and/or death to or of my child. I acknowledge that these risks may result from or be compounded by the actions, omissions, or negligence of Company employees or others, including negligent emergency response or rescue operations of the Company. I understand that the Company cannot guarantee that my child will not be exposed to Diseases, Allergens, or other risks due to my child's participation in the Event. Notwithstanding these or any other risks, I acknowledge that I am voluntarily allowing my child to participate in the Event with knowledge of the dangers involved.

IN CONSIDERATION OF THE PERMISSION EXTENDED TO MY CHILD BY TEXAS FARM BUREAU TO PARTICIPATE IN THE EVENT, I, ON MY BEHALF AND ON BEHALF OF MY CHILD, HEREBY AGREE TO RELEASE, INDEMNIFY, AND HOLD HARMLESS TEXAS FARM BUREAU, ITS AFFILIATES, AND ITS AND THEIR OFFICERS, DIRECTORS, AGENTS, EMPLOYEES, AND OTHER REPRESENTATIVES ("RELEASEES") FROM AND AGAINST ANY AND ALL LOSSES, CLAIMS, COSTS, CHARGES, EXPENSES, LIABILITIES, AND/OR DAMAGES (INCLUDING REASONABLE LEGAL COSTS AND ATTORNEYS' FEES) OF ANY KIND AND NATURE WHATSOEVER ("LIABILITY") RESULTING FROM, ARISING OUT OF, OR IN CONNECTION WITH MY CHILD'S PARTICIPATION IN THE EVENT, INCLUDING BUT NOT LIMITED TO IN-PERSON MEETINGS AND TRAVEL INCIDENT THERETO, INCLUDING BUT NOT LIMITED TO LIABILITY ARISING FROM THE PARTIAL OR SOLE NEGLIGENCE AND/OR GROSS NEGLIGENCE OF ANY RELEASEE, EXCEPT, WITH RESPECT TO ANY RELEASEE, DUE TO THE WILLFUL MISCONDUCT OF SUCH RELEASEE.

I hereby declare that the terms of this Consent and Release Form have been completely read and are fully understood and voluntarily accepted.

Parent's / Legal Guardian's Signature

Date

I have read and agree with the foregoing Consent and Release and agree to abide by the general rules of good conduct and all regulations governing the Event, including any written or oral instructions given to me by those in charge of the Event to the best of my ability.

Student's Signature

All Signatures Required. Unsigned applications will be returned to the parent/guardian and the student is not considered registered until returned with all required signatures. Submitting this signature page does not guarantee acceptance to Thrive. Registration must be approved by the County Farm Bureau.