



Lynbrook Robotics  
FIRST Team 846  
Lynbrook High School  
1280 Johnson Avenue, San Jose CA 91780

### **RELEASE FORM 2013-2014**

Participant's Name:

\_\_\_\_\_

As used below, "LRT" shall mean Lynbrook Robotics Team, and its officers, advisors, and (including any third party designated and approved by LRT at any time, including, without limitation, individuals or entities involved in print, publication, television, broadcast, or video media). As used below, "Participant" shall mean any individual, student, mentor, teacher, or volunteer involved in LRT. In consideration of the acceptance of my participation in LRT, and related programs, meetings or events, I agree to the following:

I understand that participating in the LRT necessitates working with machinery and being in circumstances that may be hazardous to my health. I also understand that it is my responsibility to understand and obey all safety procedures and warnings.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the Lynbrook Robotics Team's various activities. I hereby release the Lynbrook Robotics Team and its advisors, officers, mentors, or equipment used by the team from any liability, costs and damages resulting from this individual's participation.

### **IF THE PARTICIPANT IS A MINOR:**

(Under age of 18 at time of registration)

I agree that the minor has my consent to participate in activities stated above, and to abide by all safety rules and warnings as given by mentors and officers.

I also give my consent for the Lynbrook Robotics Team to seek emergency treatment for the minor if necessary, and I agree to accept financial responsibility for the costs related to this emergency treatment.

\_\_\_\_\_/\_\_\_\_\_  
Participant's signature / Date

\_\_\_\_\_  
Name of Parent or Guardian

\_\_\_\_\_/\_\_\_\_\_  
Signature of Parent/Guardian / Date

### **Emergency Contacts:**

\_\_\_\_\_/\_\_\_\_\_  
Emergency Contact Name / Phone Number

\_\_\_\_\_/\_\_\_\_\_  
Emergency Contact Name / Phone Number