

**Team 4099: FalconCamps**  
**ONLINE COMMUNICATION AND MEDIA CONSENT FORM**

I, \_\_\_\_\_, being the legal parent or guardian of  
\_\_\_\_\_, do hereby give my permission and consent to online communications between my son/daughter and FalconCamps counselors as well as other FalconCamps students during camp activities. Additionally, I understand that these online communications may be recorded by counselors in order to ensure a safe learning environment. Said recordings will not be used for any other purpose unless I allow them to be by checking the second box below.

While FalconCamps counselors and the Poolesville Robotics Booster Club will make every attempt to maintain a safe learning environment, I agree to not hold the Poolesville Robotics Booster Club or individuals who represent it responsible for any incidents that may occur.

Please check each box that applies (unchecked boxes will be assumed as “no permission given”).

**Please note that the first checkbox is necessary for participation in FalconCamps:**

- ☐ I give permission for my child to communicate with FalconCamps counselors and fellow students online. I understand that these sessions may be recorded in order to ensure a safe learning environment. Additionally, I agree with the terms of the liability release statement above.
- ☐ I give permission and consent that any of these communications (e.g. photographs, recorded conversations, etc.), as well as the materials and projects created by my student during the camp, may be published and/or used by Team 4099 to illustrate and promote the camp experience, FalconCamps, or Team 4099's robotics programs.

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Parent/Guardian Signature

Date