Piedmont Virginia Community College - 2015 KidsCollege@PVCC
ASSUMPTION OF RISK & STUDENT CONDUCT FORM

I, ________________________________________________ (student name) agree that as a participant in the 2015 KidsCollege@PVCC Programs at Piedmont Virginia Community College (PVCC), including Spring and Summer Academies, Boot Camps and Workshops, scheduled between January 1, 2015, and Dec. 30, 2015, I am responsible for my own behavior and well-being. I accept this condition of participation, and I acknowledge that I have been informed of the general nature of the risks involved in this activity.

I understand that in the event of accident or injury, personal judgment may be required by College personnel regarding what actions should be taken on my behalf. Nevertheless, I acknowledge that the College personnel may not legally owe me a duty to take any action on my behalf. I also understand that it is my responsibility to secure personal health insurance in advance, if desired, and to take into account my personal health and physical condition.

I further agree to abide by any and all specific requests by the College for my safety or the safety of others, as well as any and all of the College’s rules and policies applicable to all activities related to this program. In consideration for being permitted to participate in this program, and because I have agreed to assume the risks involved, I hereby agree that I am responsible for any resulting personal injury, damage to or loss of my property which may occur as a result of my participation or arising out of my participation in this program, unless any such personal injury, damage to or loss of my property is directly due to the negligence of the College. I understand that this Assumption of the Risk form will remain in effect during any of my subsequent visits and program-related activities, unless a specific revocation of this document is filed in writing with the program coordinator, at which time my visits to or participation in the program will cease.

Student Code of Conduct (Parent/guardian and student to review) I will treat fellow students, PVCC faculty and staff with respect at all times, including respectful listening, participation during hands-on activities, avoid distracting behavior and follow directions from PVCC staff as necessary to ensure a safe and enjoyable experience by all. I understand that the College reserves the right to exclude my participation in this program if my participation or behavior is deemed detrimental to the safety or welfare of others. I agree to the expectations for behavior, which includes not smoking, chewing gum, rough-housing or using inappropriate language. I understand that cell phones and electronic games are allowed for limited use as permitted during breaks. I understand that the consequences for breaking these rules may include (1) a warning from the Instructor (2) meeting with Program Manager and/or staff (3) a phone call and/or meeting with the parent/guardian (4) being asked to leave the program without a refund.

Photo/Video Release I hereby grant to PVCC, and to the press and media, the right to photograph, videotape, or otherwise digitally collect my likeness, voice and sounds (as “Works”) during my participation in the KidsCollege@PVCC programs. I further acknowledge that these cooperating entities have the right to use or sublicense these Works in all forms and for all purposes, including without limitation, advertising and other promotions for the KidsCollege@PVCC programs, including on the KidsCollege@PVCC Facebook page. It is a PVCC policy not to print a minor’s name with his/her picture without specific permission from his/her parent or guardian.

I acknowledge that I have read and fully understand this document. I further acknowledge that I agree to the terms and conditions of this form, and I am accepting these personal risks and conditions of my own free will.

__________________________________________________________________________ Date: ____________
Student signature

If participant is less than 18 years old, the following section must be completed.

My child/ward is under 18 years of age and I am hereby providing permission for him/her to participate in this program, and I agree to be responsible for his/her behavior and safety during KidsCollege@PVCC programs.

Child’s Name ________________________________

__________________________________________________________________________ Date: ____________
Parent/Guardian signature

Return signed form to: KidsCollege@PVCC, Workforce Services, 501 College Drive, Charlottesville, VA 22902 Questions: KidsCollege@pvcc.edu or 434.961.5354.