



Alameda County Sheriff's Office Santa Rita Jail



CONSENT FOR YOUTH PARTICIPATION

I hereby request and consent that my child or ward, _____ be
Participants Name
permitted to participate in the Alameda County Sheriffs Office, Santa Rita Jail Tour. I understand the following:

- The Alameda County Sheriff's Office will not provide transportation to and from the Santa Rita Jail Facility or its officials assume any liability by such accompaniment or transportation.
- I agree that no official or Alameda County Sheriff's employee associated with the event will be held responsible for any injuries or damages occurring while my child is traveling to or from the event site or during participation at the event. I do hereby hold harmless and indemnify the sponsoring agencies, their officials, divisions and agents against any and all liability, damage, loss, claims or demands which arise out of or are in any way connected with my child or ward's travel to and from, attendance or participation in the event.
- I hereby authorize any official of the event or designated chaperone to consent to emergency medical treatment as necessary for the health and safety of my child. I further agree that no official or volunteer will be held responsible for injuries or damages arising from the provision of any such emergency medical treatment. I do hereby agree to indemnify and hold harmless the sponsoring agencies, their officers, divisions and agents from any and all liability, damage, loss, claims, or demands and actions of any nature whatsoever, including attorney's fees, which arise out of or are in any way connected with the provisions of such emergency medical services.

The nature of this youth event has been reviewed with me and I hereby give my approval.

I further grant permission for _____ to appear in person or in voice,
PARTICIPANTS NAME
video or photographic presentation for radio, television, or print media reports and/or media campaign(s) resulting from participation in the event.

Participant Signature: _____ Age: _____ Date: _____

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____ Date: _____

Address: _____

Phone #: _____ Cell Phone #: _____