



What are four missions you would like your robot to accomplish this season?

1. _____

2. _____

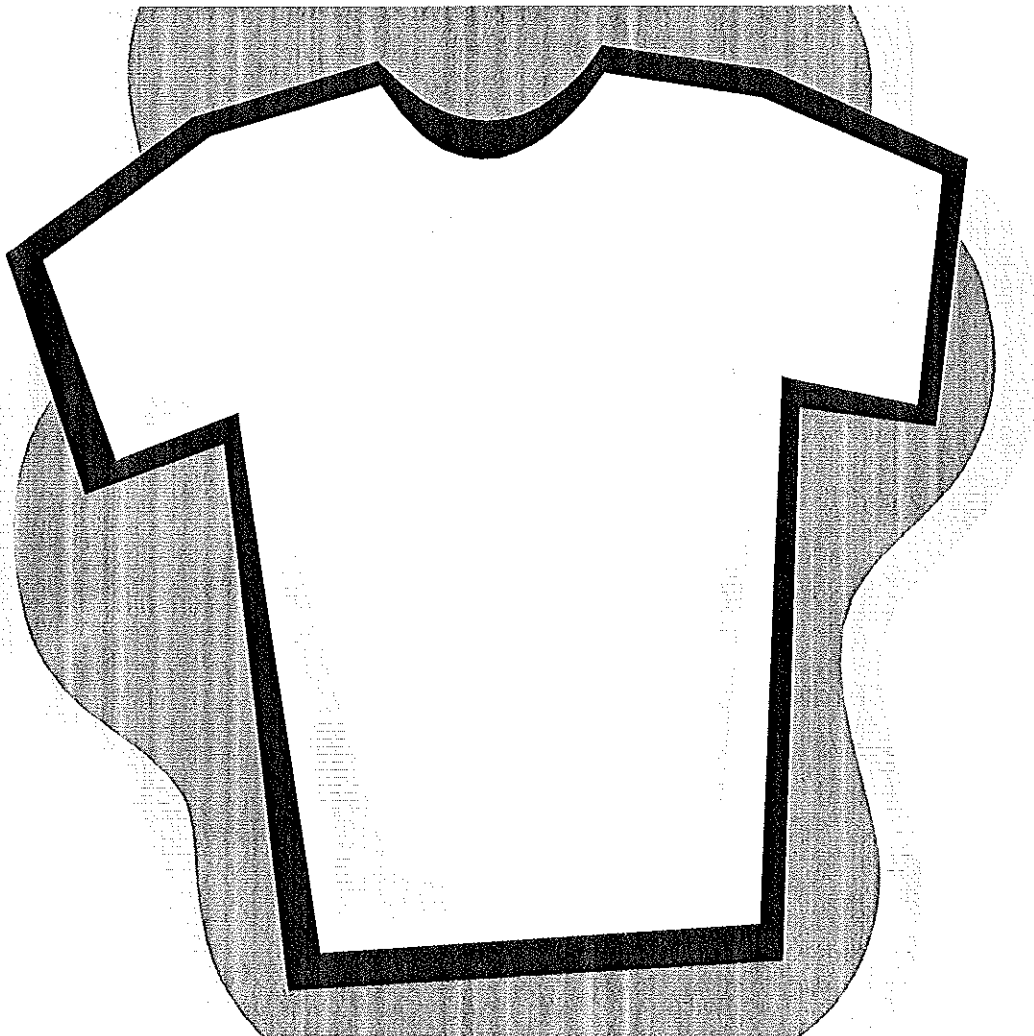
3. _____

4. _____

What disasters interest you? _____

What name would you give your robot? _____

Use the T-shirt below to design your team shirt.



CONSENT AND RELEASE AGREEMENT

Participant Name: _____
If Participant is under 18 years of age, Parent/Guardian Name: _____
Participant Date of Birth if under 18 years of age [MM/DD/YYYY]: _____
Participant Address: _____
Participant Email (If Participant is under 18 years of age, Parent/Guardian Email): _____
Participant Team Number _____

The Participant identified above ("Participant") desires to participate (as a team member, coach, mentor, judge, or in some other manner) in the FIRST® Robotics Competition, FIRST Tech Challenge, FIRST LEGO® League, Junior FIRST LEGO League, or another FIRST program (the "Programs"). As a condition of allowing Participant to participate in a Program, United States Foundation for Inspiration and Recognition of Science and Technology ("FIRST") requires that the Participant (by his or her Parent/Guardian if under 18 years of age) agree to the terms of this Consent and Release Agreement.

1. Participant (and the Parent/Guardian of a Participant under 18 years of age) understands that participation in the Program will expose Participant to risks of injury including, without limitation, injury from: building, lifting, and using electrical/mechanical robots and robot components; using tools; other participants; dancing and other associated activities. Participant (and the Parent/Guardian of a Participant under 18 years of age) understands that FIRST does not select, employ, supervise or otherwise exercise authority or control over the coaches, mentors, and other participants in the Program. Participant, if 18 years of age or older, acknowledges and agrees that he/she is primarily responsible for his/her safety. The Parent/Guardian of a Participant under 18 years of age acknowledges and agrees that the Parent/Guardian is primarily responsible for the Participant's safety and that the Parent/Guardian will monitor, as appropriate considering the age of the Participant and other factors, the Participant's participation in the Program.
2. **In consideration for FIRST allowing the Participant to participate in a Program, Participant (and the Parent/Guardian of a Participant under 18 years of age for and on behalf of the Participant and the Parent/Guardian) assumes all risk of such participation and hereby releases FIRST and (except as expressly provided below) all of FIRST's directors, officers, employees, volunteers, and agents from any and all claims for any injury of any kind to the Participant (and the Parent/Guardian) or other damages that may occur as a result of the Participant's participation in the Program, including without limitation any injuries or other damages that may be caused by the negligence of FIRST or negligence of any of FIRST's directors, officers, employees, volunteers, or agents (including without limitation negligently failing to adequately investigate or screen coaches, mentors, volunteers, etc.), and agrees not to file any lawsuit or otherwise make any claim against FIRST or any of FIRST's directors, officers, employees, volunteers, or agents for any such injury or other damages. The Participant (and the Parent/Guardian of a Participant under 18 years of age) does not hereby release any claims against any individual person who intentionally causes injury to the Participant.**
3. Participant (and the Parent/Guardian of a Participant under 18 years of age) understands that photographs, videotapes, and other recordings will be made of participants in the Programs, including the Participant. Participant (and the Parent/Guardian of a Participant under 18 years of age) consents to those photographs, videotapes, and other recordings and the use thereof (i) as part of a record of the Program and (ii) to promote FIRST and the Programs.

Participant (and the Parent/Guardian of a Participant under 18 years of age) has read this document and understands that this Consent and Release Agreement includes a waiver of the right to make injury claims that is intended to be legally binding. By signing below, Participant (and the Parent/Guardian of a Participant under 18 years of age) agrees to this Consent and Release Agreement.

Signature (of Participant if 18 years of age or older or Parent/Guardian if Participant under 18)

Printed name of person signing

Date

Charleston County School District Field Trip Chaperone Form

Name: _____

Supervising teacher/sponsor: _____ Grade/Class: _____

Field trip dates(s): _____ Destination: _____

I understand that my role as a chaperone is to ensure the safety and well being of all students assigned to my supervision. Therefore, I agree to do the following.

- Support the supervising teacher/sponsor in enforcing established rules, procedures and expectations for student participation and effort.
- Commit my undivided attention to the students I am assigned to supervise (therefore, I shall not bring my child's siblings on the trip nor shall I engage in activities which distract my attention from the students I supervise).
- Model appropriate language and behavior and abide by all Charleston County School District policies and regulations which govern the behavior of employees during working hours for the entire duration of the field trip while in the presence of the students.

Signature

Date

If you shall be transporting students in your own vehicle, please complete this section as well.

Vehicle make and model: _____

License tag number: _____

Insurance company and policy number: _____
(Please attach proof of insurance)

I understand that my vehicle insurance shall serve as the primary insurance coverage in the event of an accident during the field trip. The district's insurance may be considered for coverage only after my insurance coverage is exhausted.

Signature

Date

**Charleston County School District
Field Trip Permission Signature Form**

I grant permission for my child, _____, to go on the field trip
to _____ on _____

(or as described on the attached schedule). I have discussed with my child the expectations for his/her behavior while on this trip.

Parent/Legal guardian signature

Date

_____ My child has the following medical condition(s): _____

Please check with the school office to secure directions/medications/information.