



20th Annual Human Rights Academy
June 24-28 * 9am-2pm * University of Hawaii



STUDENT WAIVER FORM

PLEASE PRINT CLEARLY

Name _____ Grade (2018-19) _____

Student Waiver

While participating in PAAC sponsored activities, behavior consistent with PAAC's goals and image is expected. All students are expected to follow the school rules outlined in Chapter 19 concerning student conduct and general behavior by the Hawaii State Department of Education. Failure to do so will result in your being sent home, potentially at your own expense.

I understand the above conditions and agree to abide by them. _____

Approval of Parent or Guardian and Waiver of Claims

I hereby approve the participation of _____ (name of child) in the 20th Annual Human Rights Academy.

I expressly waive any and all claims against the Pacific and Asian Affairs Council (PAAC) and Hawaii Institute for Human Rights, their respective board members, employees, agents, representatives and successors, arising from or in connection with any accident, injury, illness, or other damage that may be incurred by the aforementioned student or said person's property in connection with or incident to his/her attendance in the 20th Annual Human Rights Academy.

Emergency Medical Authorization

In case of emergency, please call: _____ (name)
 _____ (relationship to student) _____ (phone #)

I hereby authorize the medical treatment of the student named above by any licensed physician in the event of a medical emergency. He/she is covered by the following health plan/insurance company:

Company/Plan Name: _____ Account # _____

Photograph and Media Waiver

I consent to allow photographs of my child participating in the 20th Annual Human Rights Academy be used for publicity or grant reporting purposes (for example, on the PAAC web page or in annual reports). I understand that newspaper or television media may be present at this event. I give permission for my child to appear in the newspaper or on television.

Parent/Guardian Signature: _____ Date: _____

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