



## STUDENT/PARENT RELEASE FORM PAGE Future Georgia Educators Day

(Please print neatly.)

Student's Name: \_\_\_\_\_

Student's School: \_\_\_\_\_

Name of Event:  PAGE Future Georgia Educators Day

My parent(s) or guardian(s) and I hereby release the Professional Association of Georgia Educators (PAGE) and PAGE Foundation from all liability and responsibility and hold them harmless from any damage or injury which may occur or be caused by me before, during or following any PAGE or PAGE Foundation activity, including travel.

\_\_\_\_\_ (Parent, please initial)

I/we further consent to the release of information about, or relative to, my/our child's participation in activities, including scores, photographs, sound and video recordings, and any other data in association to my participation in the Professional Association of Georgia Educators (PAGE) or PAGE Foundation programs or activities. The PAGE and PAGE Foundation organizations shall have full rights to reproduction and use of all such materials.

\_\_\_\_\_ (Parent, please initial)

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent(s)/Guardian's Signature

\_\_\_\_\_  
Date