

Consent for Minors to Participate in Florida Conference TLT Activities

Name of Sponsoring Entity Florida Conference of SDA TLT Program

Parental Permission Form for Minor's Online Participation in all TLT activities as well as taking photos and videos at TLT activities that may be used on the TLT YouTube Channel and other conference media resources.

Name of Minor (print legibly): _____ Minor Grade Level: _____

Parent/Guardian Name: _____

Phone: (____) _____ (please circle - Home or Cell)

Contact Number #2: (____) _____ (please circle - Home or Cell)

Email Address _____

Address _____

Please check below to indicate the participation of minor identified above.

_____ I do give permission for the minor to participate and allow the use of their image and likeness to be used.

_____ I do not give permission for the minor to participate. (If you choose for the minor NOT to participate in online at Florida Conference of SDA TLT Program, the minor will not be able to participate at all, including in person trainings.)

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name Printed: _____

Further, I/we understand by agreeing to allow the minor to participate that the Online Activities identified above involve certain risks such as exposure to bullying, pornography, misappropriation of personal information and other risks associated with online activity. In addition, the Sponsoring Entity stated above cannot guarantee that participation in this online activity will not expose your hardware to viruses, and other malicious software or code-based tools. I/we still wish to proceed with the activities described herein I/we do so and assume all risk and understanding of the risks involved. I/we fully understand that the sponsoring organization cannot fully protect me, my child, or my computer systems, including software and hardware. Any technical support for my computer systems, the use of any software on my computer systems or accessed through the internet are my sole responsibility. I understand that supervision of what my child accesses online, the information they share, and any messages with volunteers, employees, other parents and other minors are my responsibility. I agree to fully supervise all activities the minor participates in and to screen and assume responsibility for all messages my child sends and receives. **I have read and understand the foregoing.**

_____ Initials

Please return this form to Kim Lucas at FL.Conf.TLT@gmail.com. Copy should be kept in TLT folder. Need to be renewed each year.