

FILING LABEL



Cody CAN Activity Parent Permission Form

Cody CAN hosts activities for students who have joined the CAN Program. These activities are not directly affiliated with the school district. Please review, sign, and return this form if you choose to allow your student to participate in CAN Activities.

Parent/Guardian Informed Consent

Emergency Medical Treatment: I realize that there is a risk of my student being injured while participating in CAN Activities that is inherent in all activities participation (slipping, tripping, colliding with other students, etc). In the event of a medical emergency during a CAN Event, I hereby authorize Cody CAN and its faculty members in charge of my child named below to obtain all necessary medical care for my child in the event that I cannot be reached to authorize it myself. I hereby authorize any licensed physician and/or medical personnel to render necessary medical treatment to my child.

Social Media Photo Release: I understand that CAN Activities are photographed and that these photographs may be published on facebook and other social media. I hereby give consent that my child's image be published online when he/she participates in CAN Activities*.

**I hereby give my consent for my child to participate in CAN Activities.
This permission is valid for as long as my student is a CAN Member.**

(this form is valid until my student graduates, leaves Cody Schools, quits CAN, or I contact CAN to rescind permission)

Student (Printed Name)

Student Grade / Homeroom Teacher

Parent/Guardian (Printed Name)

Parent/Guardian (Signature)

Date Signed

Emergency Contact Phone Number

**CAN will gladly work with parents/guardians to remove unwanted images from social media after they are published. However, it is not possible for us to filter all photos for individual students before they are posted.*