



INFFA Portal

Waiver Guide

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Waiver Overview

Purpose

As a part of a strategic initiative to better align the inffa.org portal to need to Indiana FFA Organization, a waiver feature has now been integrated advisor portal. Starting the fall of 2022, this new waiver system will be replacing any previous waiver system utilized by Indiana FFA.

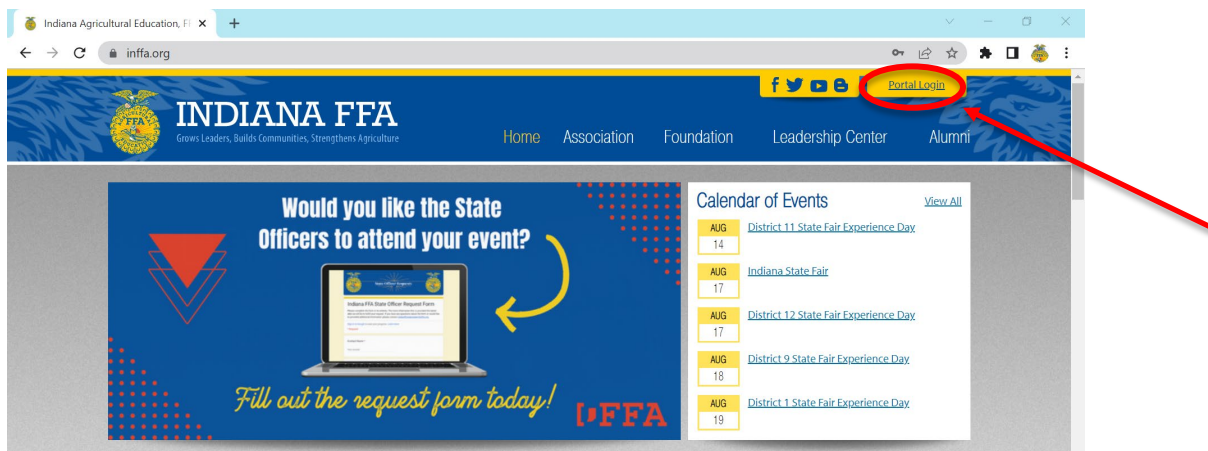
All students participating in Indiana FFA Programs (CDE's, LDE's, Conferences, Conventions, Events, etc.) will need to have a completed waiver, with parent/guardian signature, before they can be registered for a program.

Questions regarding the waiver system should be directed to Skylar Clingan at sclingan@inffa.org.

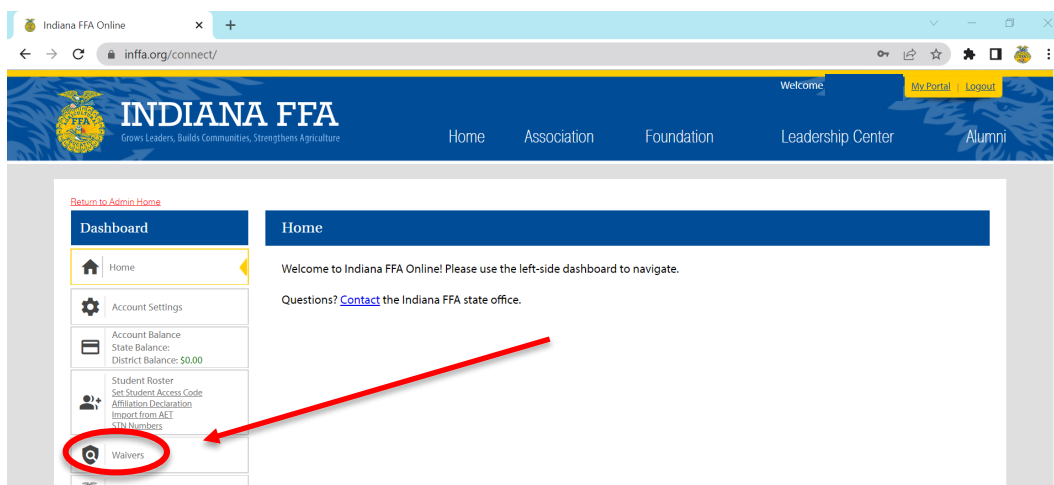
Creating a New Student Waiver

The following steps should be taken in order to create a new student waiver.

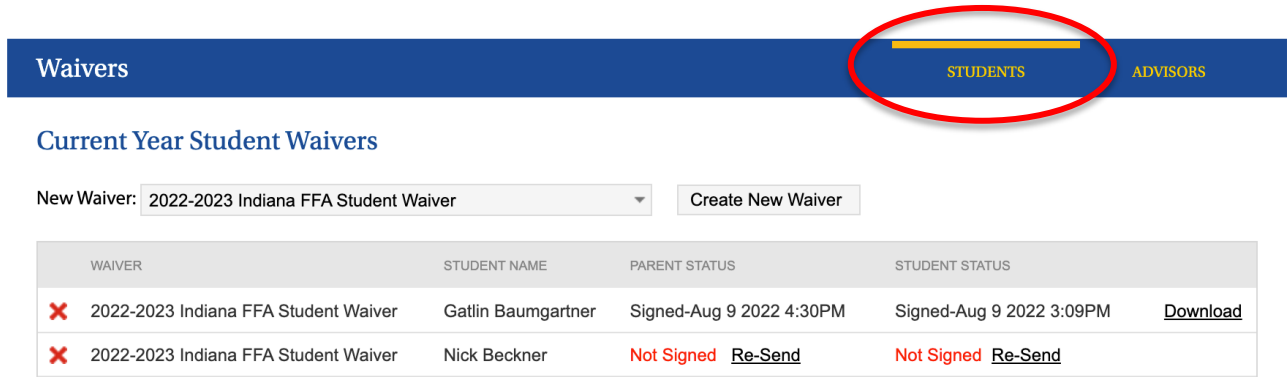
1. Log into the portal on www.inffa.org



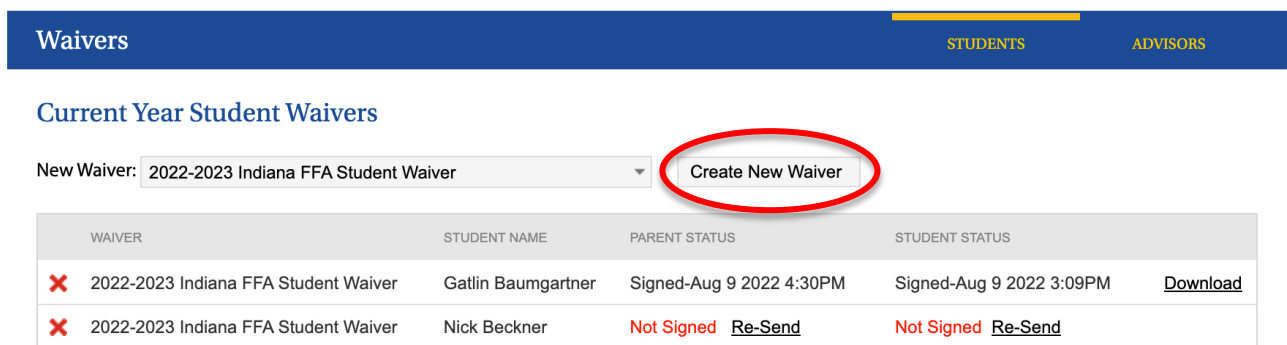
2. In the advisor portal, in the list along the left side of the screen, you will now see a **Waivers** option along the left side of the screen.
3. Click **Waivers** on the dashboard to enter the wavier management page.



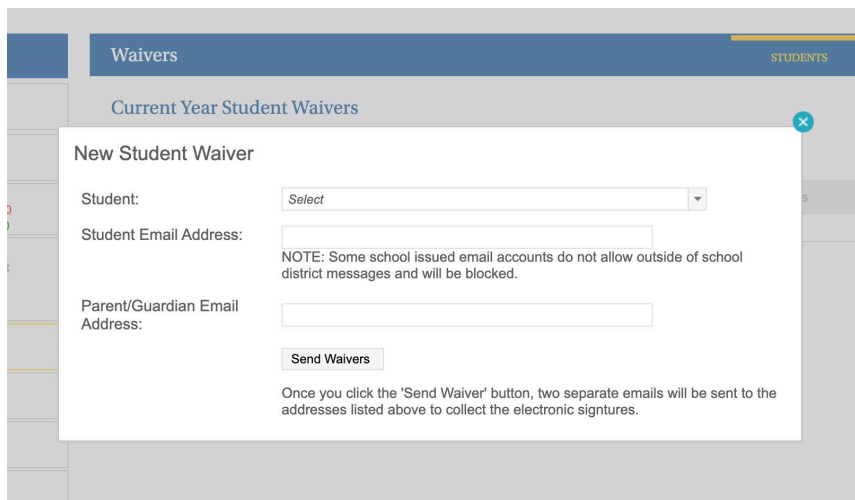
4. At the top of the Waivers page, you will see the option for Students and Advisors. Be sure that the **Students** option is selected.



5. Select the **Create New Waiver** option.



6. In the pop-up window complete the following steps to create a new waiver for a student.
 - a. Select the student from your active roster.
 - i. NOTE: If a student does not appear in the dropdown list, they are not completed in your roster. They will need to be submitted and approved in your roster BEFORE a waiver can be created.
 - b. Provide the student's email address.
 - i. NOTE: Some school issued email accounts do not allow outside of school district messages and will be blocked. Therefore, a non-school email is encouraged.
 - c. Provide an email for the student's Parent/Guardian.



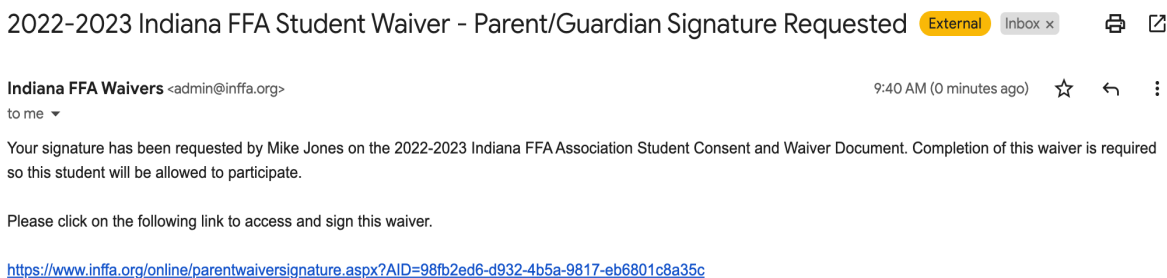
7. Once the information has been provided, select the **Send Waivers** button. This will trigger email notifications to be sent to the student and the parent/guardian.
 - a. NOTE: Parent/guardians and student will receive DIFFERENT emails with DIFFERENT links. The student AND the parent/guardian MUST complete the waiver from the link in the email.

b. Example Email Notifications

i. Student Email



ii. Parent/Guardian Email



8. The Student and the Parent/Guardian will need to complete their version of the wavier. Examples of their versions are shown below.

a. Student Version

Signatures & Emergency Information

The undersigned Student Participant and Parent/Guardian affirm they have read and understand the terms of this Indiana FFA Consent & Waiver Document. By signing below, the Student Participant and Parent/Guardian voluntarily consent to giving up substantial rights and understand that if they make changes to the terms of this Indiana FFA Consent & Waiver Document, the Student Participant will not be able to participate in any FFA program or activity.

Parent/Guardian signature required for all participants under the age of 21; both participant and parent/guardian signatures are required.

Student Email:

Student Name:

Date:

Consent By checking here, I am consenting to the use of my electronic signature in lieu of an original signature on paper. You have the right to request that you sign a paper copy instead. By checking here, you are waiving that right. After consent, you may, upon written request to us, obtain a paper copy of an electronic record. No fee will be charged for such copy and no special hardware or software is required to view it. Your agreement to use an electronic signature with us for any documents will continue until such time as you notify us in writing that you no longer wish to use an electronic signature. There is no penalty for withdrawing your consent. You should always make sure that we have a current email address in order to contact you regarding any changes, if necessary.

b. Parent Version

the Student Participant and Parent/Guardian voluntarily consent to giving up substantial rights and understand that if they make changes to the terms of this Indiana FFA Consent & Waiver Document, the Student Participant will not be able to participate in any FFA program or activity.

Parent/Guardian signature required for all participants under the age of 21; both participant and parent/guardian signatures are required.

Student Name

Student DOB

Emergency Contact Name

Emergency Contact Number

Medical Conditions

Medications

Physician Information

Parent/Guardian Email

Parent/Guardian First Name

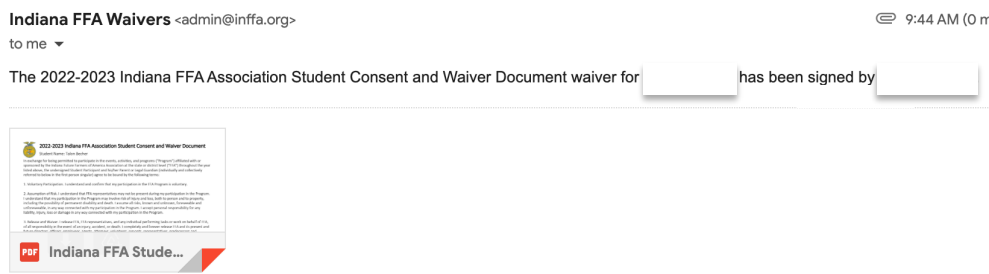
Parent/Guardian Last Name

Date

Consent By checking here, I am consenting to the use of my electronic signature in lieu of an original signature on paper. You have the right to request that you sign a paper copy instead. By checking here, you are waiving that right. After consent, you may, upon written request to us, obtain a paper copy of an electronic record. No fee will be charged for such copy and no special hardware or software is required to view it. Your agreement to use an electronic signature with us for any documents will continue until such time as you notify us in writing that you no longer wish to use an electronic signature. There is no penalty for withdrawing your consent. You should always make sure that we have a current email address in order to contact you regarding any changes, if necessary.

9. As waivers are created, they are shown in a list on the waivers page. In this list you will be able to see the Parent/Guardian and Student completion status.
10. Once each version (Parent/Guardian and Student) of the waiver is signed, it will show the completed status at the bottom of the page and lock down all of the fields from any further editing.
11. When the student and parent electronically sign and complete their waiver, a confirmation email is sent to the student, parent and advisor. A PDF copy of the waiver document is attached to the email and can also be downloaded by the advisor on the "Waivers" page in IN Roster once both parties have signed the waiver and it is deemed complete.
 - a. NOTE: The advisor will receive an email twice, one for when the student signs the waiver and one for when the parent signs the waiver. A PDF copy of the waiver document is attached to the email and can also be downloaded by the advisor on the "Waivers" page in IN Roster once both parties have signed the waiver and it is deemed complete.

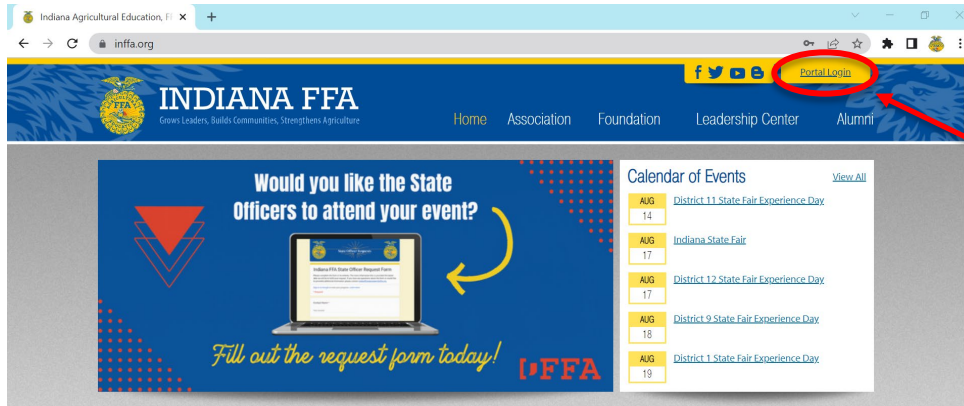
b. Example Confirmation Email



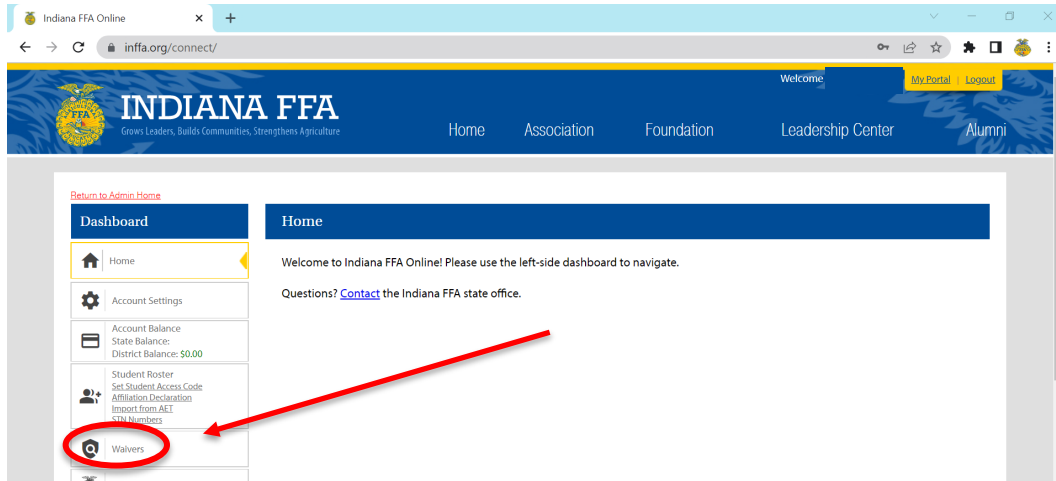
12. This process will need to be repeated for any student that will need to attend an Indiana FFA Program each year.

Resending a Student Waiver

1. Log into the portal on www.inffa.org



2. In the advisor portal, in the list along the left side of the screen, you will now see a **Waivers** option along the left side of the screen.
3. Click **Waivers** on the dashboard to enter the waiver management page.



4. At the top of the Waivers page, you will see the option for Students and Advisors. Be sure that the **Students** option is selected.

Waivers
STUDENTS
ADVISORS

Current Year Student Waivers

New Waiver: 2022-2023 Indiana FFA Student Waiver Create New Waiver

WAIVER	STUDENT NAME	PARENT STATUS	STUDENT STATUS
✘ 2022-2023 Indiana FFA Student Waiver	Gatlin Baumgartner	Signed-Aug 9 2022 4:30PM	Signed-Aug 9 2022 3:09PM Download
✘ 2022-2023 Indiana FFA Student Waiver	Nick Beckner	Not Signed Re-Send	Not Signed Re-Send

5. Find the student in the list of created waivers.
 - a. NOTE: If the student does not appear in the list of created waivers, then a waiver has not been created for them. See the above section on creating a new student waiver.

- 6. In the columns that are not signed, you will see a **Re-Send** Option. Selecting this will trigger a new email notification for that version of the waiver.

Waivers STUDENTS ADVISORS

Current Year Student Waivers

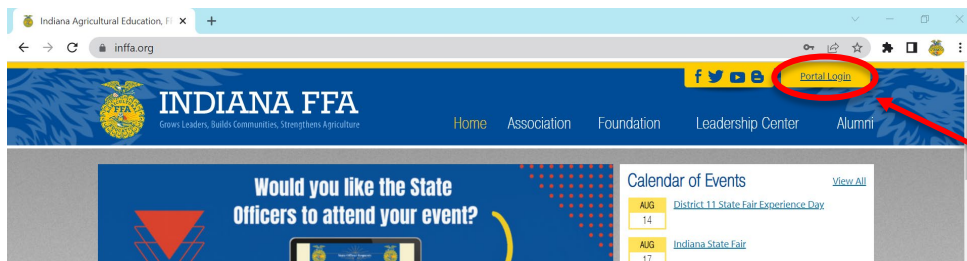
New Waiver:

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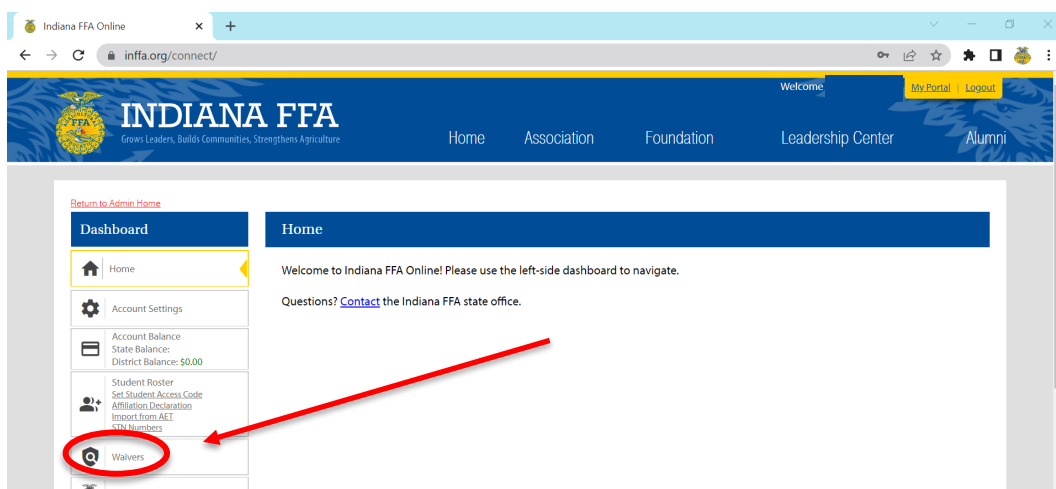
Creating a New Advisor Waiver

The following steps should be taken in order to create a new advisor waiver.

1. Log into the portal on www.inffa.org



2. In the advisor portal, in the list along the left side of the screen, you will now see a **Waivers** option along the left side of the screen.
3. Click **Waivers** on the dashboard to enter the waiver management page.



4. At the top of the Waivers page, you will see the option for Students and Advisors. Be sure that the **Advisors** option is selected.



Current Year Advisor Waivers

New Waiver:

5. Select the **Create New Waiver** option.

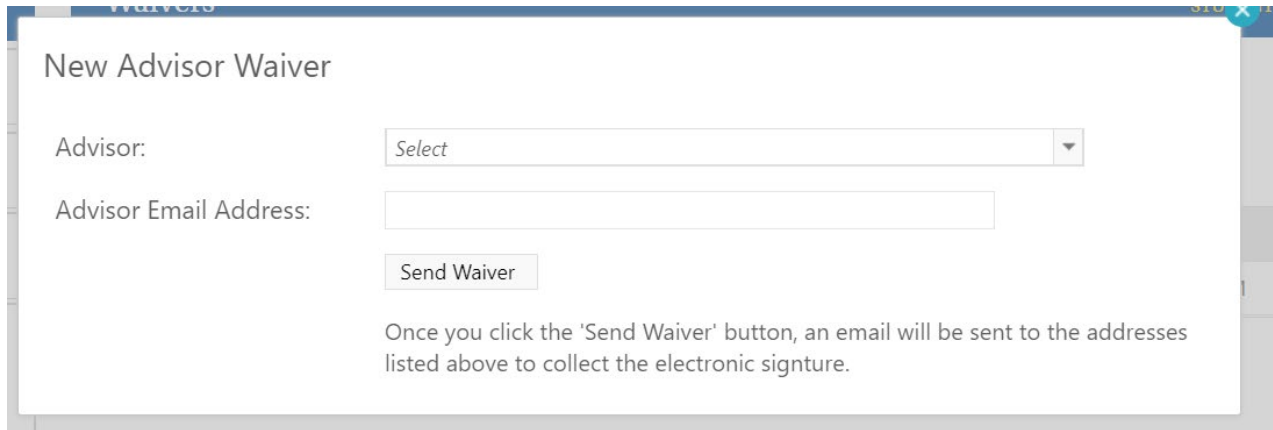


Current Year Advisor Waivers

New Waiver:

6. In the pop-up window complete the following steps to create a new waiver for an advisor.
 - a. Select the advisor from your active advisors list.
 - i. NOTE: If an advisor does not appear in the dropdown list, contact Indiana FFA State Staff to have them added to your chapter's portal.
 - b. Provide the advisor's email address.

- i. NOTE: Some school issued email accounts do not allow outside of school district messages and will be blocked. Therefore, a non-school email is encouraged.

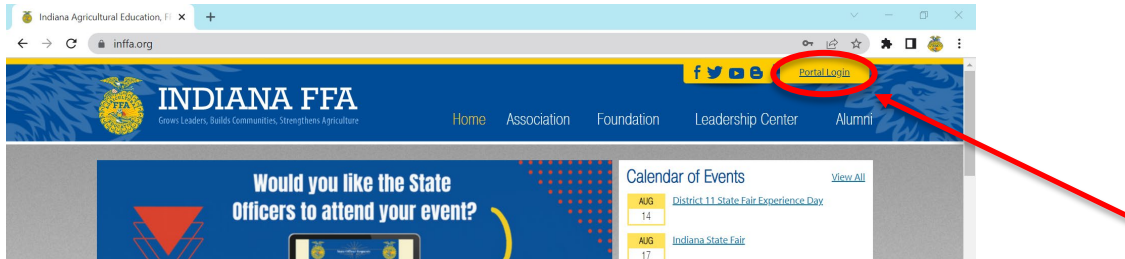


- 7. Once the information has been provided, select the **Send Waivers** button. This will trigger email notifications to be sent to the student and the parent/guardian.
 - a. Example Email Notifications
- 8. As waivers are created, they are shown in a list on the waivers page. In this list you will be able to see the completion status.
- 9. Once the waiver is signed, it will show the completed status at the bottom of the page and lock down all the fields from any further editing.
- 10. When the advisor has electronically sign and complete their waiver, a confirmation email is sent to the advisor. A PDF copy of the waiver document is attached to the email and can also be downloaded by the advisor on the "Waivers" page in IN Roster.
- 11. This process will need to be repeated for any advisor that will need to attend an Indiana FFA Program each year.

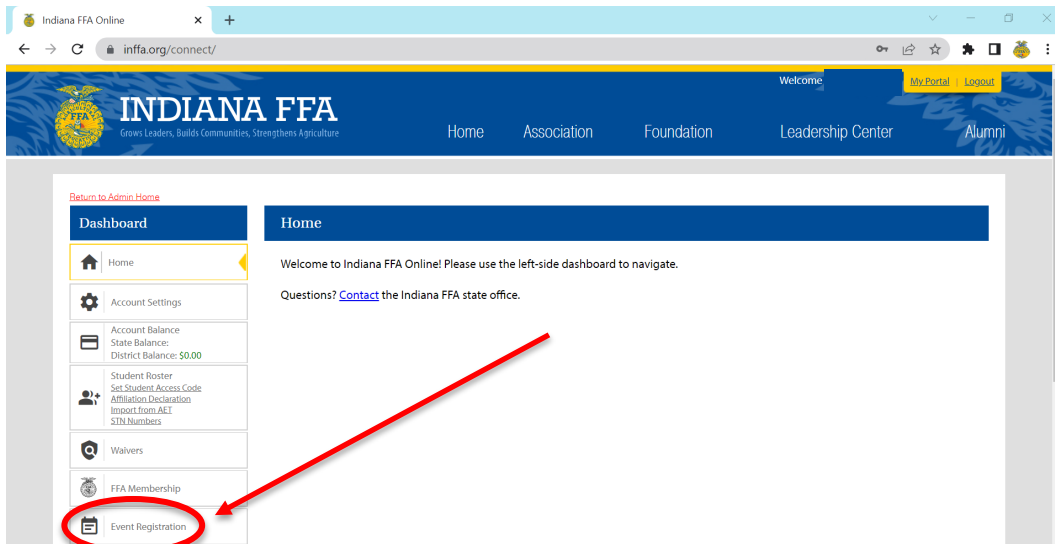
Registering for an Event

The integration of the waiver system to the INFFA portal allow for automatic validation of waiver completion prior to event registration. This new functionality has minimal effects on the event registration process. Now when registering for an event **ONLY** students with completed waivers will appear in your dropdown menu. Below are additional instruction for registering for an event.

1. Log into the portal on www.inffa.org



2. Click **Waivers** on the dashboard to enter the wavier management page.



3. Select the event that you would like to register for from the list.
4. Begin selecting student that you would like to register for the event.
 - a. NOTE: If a waiver is required to participate in the event. You will see a red message denoting this above the dropdown box. **ONLY STUDENTS THAT HAVE A COMPLETED WAIVER WILL APPEAR IN THE DROPDOWN BOX.** If a student does not appear in the dropdown list, they do not have a completed waiver in the new waiver system.

Printing Completed Waivers

Should you choose to keep record of student waivers via a printed method, the new waiver system has multiple ways that this can be completed. Below are a few ways that you can access, and print completed waivers.

From Email Confirmation

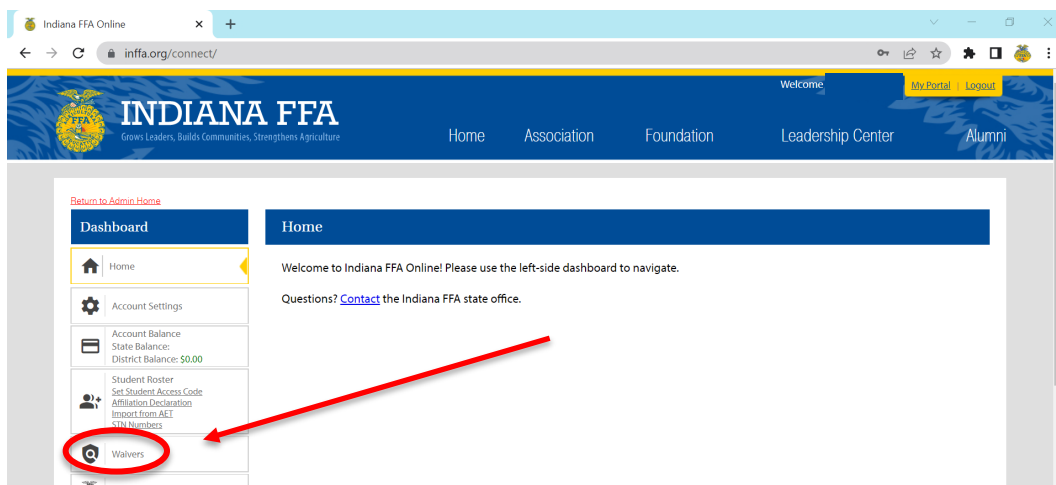
1. Once a student waiver has been signed by both students and a parent/guardian, you will receive an email notification regarding the completed waiver
2. This email will have an attached PDF that can be saved and printed for your records.

From INFFA Portal

1. Log into the portal on www.inffa.org



2. In the advisor portal, in the list along the left side of the screen, you will now see a **Waivers** option along the left side of the screen.
3. Click **Waivers** on the dashboard to enter the waiver management page.



4. At the top of the Waivers page, you will see the option for Students and Advisors. Be sure that the **Students** option is selected.

Waivers STUDENTS ADVISORS

Current Year Student Waivers

New Waiver: 2022-2023 Indiana FFA Student Waiver Create New Waiver

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5. Find the student in the list of created waivers.
 - a. NOTE: If the student does not appear in the list of created waivers, then a waiver has not been created for them. See the above section on creating a new student waiver.
6. In the waiver is complete, in the row with the student's name, you will see a **Download** option. Selecting this will automatically download a PDF copy of the student's completed waiver.

Completed Waiver Examples

Student Waiver Example



2022-2023 Indiana FFA Association Student Consent and Waiver Document

Student Name: _____

In exchange for being permitted to participate in the events, activities, and programs ("Program") affiliated with or sponsored by the Indiana Future Farmers of America Association at the state or district level ("FFA") throughout the year listed above, the undersigned Student Participant and his/her Parent or Legal Guardian (individually and collectively referred to below in the first person singular) agree to be bound by the following terms:

- 1. Voluntary Participation.** I understand and confirm that my participation in the FFA Program is voluntary.
- 2. Assumption of Risk.** I understand that FFA representatives may not be present during my participation in the Program. I understand that my participation in the Program may involve risk of injury and loss, both to person and to property, including the possibility of permanent disability and death. I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in the Program. I accept personal responsibility for any liability, injury, loss or damage in any way connected with my participation in the Program.
- 3. Release and Waiver.** I release FFA, FFA representatives, and any individual performing tasks or work on behalf of FFA, of all responsibility in the event of an injury, accident, or death. I completely and forever release FFA and its present and future directors, officers, employees, agents, attorneys, volunteers, servants, representatives, predecessors and successors in interest, assigns, and all other persons, firms, or corporations with whom any of the former have been, are now, or may hereafter be affiliated, from any and all liability for and waive any and all claims, actions, lawsuits, demands, grievances, charges, rights, damages, costs, legal fees, losses of service, or expenses for injury, loss, or damage, in any way connected with my participation in the Program, whether or not caused in the whole or part by the negligence of FFA or any of the individuals mentioned above. This release and waiver shall also apply to my family members, legal representatives, heirs, assigns, successors, or any other person or organization connected to me.
- 4. Consent to Medical and Dental Treatment.** I authorize FFA to secure for me and/or provide to me, through medical and dental personnel of its choice, customary medical and/or dental assistance, transportation, and emergency medical and/or dental services, including but not limited to X-ray, examination, anesthetic, medical or dental diagnosis or treatment and hospital care, to be rendered by any physician or dentist licensed to practice in the United States. I will assume all expenses involved in such medical/dental procedures and will not hold FFA, FFA representatives, and any individual performing tasks or work on behalf of FFA liable for any expenses.
- 5. Publication.** I authorize FFA to use my name, photo, video, materials produced for the Program, or presentation in Program, in FFA materials, including but not limited to educational resources, press releases, web-based publicity, and other publicity materials.
- 6. Code of Ethics.** I agree to abide by the FFA Code of Ethics, as stated in the Official Manual, as well as the code of conduct and guidelines for participation in the Program. I will conduct myself in a manner representative of the school, community, and the FFA. Any illegal substance or unlawful behavior may be reported to the proper local authorities.
- 7. Eligibility.** I hereby certify that I meet all eligibility requirements for participation in the FFA Program for the current year, as set forth by the National FFA Constitution and Indiana FFA Bylaws. Any material submitted and participation is the result of my own effort and ability and abides by all rules and policies.
- 8. Enforcement.** This document contains the entire agreement between me and the FFA with regard to the matters set forth in it. This document may be amended or modified only by a written document signed by the parties. Each term and provision of the document shall be valid and enforced separately to the fullest extent permitted by law. This document shall be governed, construed, and enforced in accordance with the law of the State of Indiana.

Indiana FFA Foundation & Leadership Center

There may be times throughout the year that students utilize the FFA Leadership Center property, which is owned by

Indiana FFA Foundation.

In the consideration of The Indiana FFA Foundation, Inc., an Indiana non-profit corporation (the "Owner"), allowing me to utilize camp grounds and related facilities located at 6595 S 125 W, Trafalgar, Johnson County, Indiana 46181 ("Facilities"), I, and if I am not 21 years old, my parent or legal guardian (individually and collectively referred to below in the first person singular), agree to be bound by each of the following as my voluntary act and deed:

1. Identification of Risks. I understand that the Owner may not be present during my use of the Facilities. I understand that my use of the Facilities may involve risk of injury and loss, both to person and to Facilities. I also understand that the risk of injury may include the possibility of permanent disability and/or death. I understand that this Waiver and Release of Liability and Assumption of Risk Acknowledgement ("Agreement") is intended to address all of the risks of any kind associated with my use of the Facilities in any respect, or with the time I am at the Facilities, including, particularly, such risks created by actions, inactions, or negligence on the part of the Owner or its employees, agents, volunteers, successors, or assigns, including but not limited to risks created by the following: (a) the use and condition of the premises, facilities, and equipment; (b) the failure of the Owner to foresee or to protect me from actions, inactions, negligence, recklessness, or intentional or criminal misconduct of persons; (c) the inadequacy or unavailability of medical facilities or treatment; or (d) the lack or inadequacy of supervision at the Facilities.

2. Assumption of Risk. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE OWNER, as listed above, or others and assume FULL AND ABSOLUTE responsibility for my and/or my invitees or licensees use of the Facilities.

3. Release and Waiver. I hereby release the Owner and its directors, officers, sureties, employees, agents, volunteers, successors and assigns (collectively, the "Owner Parties") of and from any and all claims for injury, loss, damages, actions and causes of action, claims and demands whatsoever, whether known or unknown and whether or not founded in fact or in law, and of and from any and all manner of suits, liabilities, losses, covenants, controversies, agreements, promises, damages, judgments, claims and demands whatsoever in law or in equity including, but not limited to, those arising out of or in any way related to my and/or my invitees or licensees use of the Facilities (each a "Claim"), and all acts or omissions related thereto, whether or not caused in whole or part by the negligence or other misconduct of any of the Owner Parties, from the beginning of the world to the end of the Term, as defined below, of this Agreement, which the undersigned has had or now has or which he/she or his/her heirs, administrators, successors and assigns hereafter can shall or may have or acquired.

4. Indemnification. I, on behalf of myself and my administrators, heirs, successors, and assigns, hereby voluntarily agree to RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, DEFEND AND INDEMNIFY the Owner Parties of and from any and all claims for injury, loss, damages, actions and causes of actions, claims and demands whatsoever, whether known or unknown and whether or not founded in fact or in law, and of and from any and all manner of suits, liabilities, losses, covenants, controversies, agreements, promises, damages, judgments, claims and demands whatsoever in law or in equity including, but not limited to, those arising out of or in any way related to my and/or my invitees or licensees use of the Facilities, and all acts or omissions related thereto, whether or not caused in whole or part by the negligence or other misconduct of any of the Owners Parties, from the beginning of the world to the end of the Term, defines below, which the undersigned has had or now has or which he/she or his/her heirs, administrators, successors, and assigns hereafter can, shall or may have or acquire. I specifically understand that I am releasing, discharging and waiving any claims or actions that I any have presently or in the future for the negligent acts or other misconduct by any of the Owner Parties.

5. Personal Likeness Release and Waiver. I understand that my or my invitees or licensees personal likeness, both in print and video, may be used by the Owner or Owner Parties for official purposes in publications such as, but not limited to, websites, brochures, Facebook, Twitter or other digital or print media for the purpose of informing others about the use of the Facilities or promotion of the Facilities.

6. Binding Effect. This Agreement shall be binding upon my relatives, personal representatives, heirs, beneficiaries, next of kin, or assigns and shall inure to the benefit of the Owner and its successors and assigns.

7. Severability. If any term or provision of this instrument or the application thereof to any person or circumstances shall to any extent or for any reason be invalid or unenforceable, the remainder of this instrument and the application of such term or provision to persons or circumstances other than those as to which it is held invalid or unenforceable shall not be affected thereby, and each term and provision of the instrument shall be valid and enforced to the fullest extent permitted by law.

(If bringing medications to the conference, please only bring enough for the duration of the conference in the original prescription bottle. The nurse will manage any medications that are considered controlled substances. All other medications will be the responsibility of the student, unless requested otherwise by the parents/student.)

The following over-the-counter medications may be used as an on needed basis to treat a variety of complaints and simple illnesses or injury such as: Tylenol, ibuprofen, cough syrup, diarrhea/anti- diarrhea, antacid, Benadryl or antibacterial ointment, hydrogen peroxide, burn ointment, Band-Aids. Please note in medication section below any of the above items that should NOT be used or ADDED to the list that you would prefer your student not use/take.

Signatures & Emergency Information

The undersigned Student Participant and Parent/Guardian affirm they have read and understand the terms of this Indiana FFA Consent & Waiver Document. By signing below, the Student Participant and Parent/Guardian voluntarily consent to giving up substantial rights and understand that if they make changes to the terms of this Indiana FFA Consent & Waiver Document, the Student Participant will not be able to participate in any FFA program or activity.

Parent/Guardian signature required for all participants under the age of 21; both participant and parent/guardian signatures are required.

Student Name

Student Email Address

Student DOB

Emergency Contact Name

Emergency Contact Number

Medical Conditions

Medications

Physician Information

Parent/Guardian Email

Parent/Guardian Name

Student Signed

CST - IP Address:

Parent/Guardian Signed

8/11/2022 9:44 AM CST - IP Address: 146.86.176.70

Advisor Waiver Example

**2022-2023 Indiana FFA Association Advisor Consent and Waiver Document**Name:

In exchange for being permitted to participate in the events, activities, and programs ("Program") affiliated with or sponsored by the Indiana Future Farmers of America Association at the state or district level ("FFA") throughout the year listed above, the undersigned Student Participant and his/her Parent or Legal Guardian (individually and collectively referred to below in the first person singular) agree to be bound by the following terms:

- 1. Voluntary Participation.** I understand and confirm that my participation in the FFA Program is voluntary.
- 2. Assumption of Risk.** I understand that FFA representatives may not be present during my participation in the Program. I understand that my participation in the Program may involve risk of injury and loss, both to person and to property, including the possibility of permanent disability and death. I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in the Program. I accept personal responsibility for any liability, injury, loss or damage in any way connected with my participation in the Program.
- 3. Release and Waiver.** I release FFA, FFA representatives, and any individual performing tasks or work on behalf of FFA, of all responsibility in the event of an injury, accident, or death. I completely and forever release FFA and its present and future directors, officers, employees, agents, attorneys, volunteers, servants, representatives, predecessors and successors in interest, assigns, and all other persons, firms, or corporations with whom any of the former have been, are now, or may hereafter be affiliated, from any and all liability for and waive any and all claims, actions, lawsuits, demands, grievances, charges, rights, damages, costs, legal fees, losses of service, or expenses for injury, loss, or damage, in any way connected with my participation in the Program, whether or not caused in the whole or part by the negligence of FFA or any of the individuals mentioned above. This release and waiver shall also apply to my family members, legal representatives, heirs, assigns, successors, or any other person or organization connected to me.
- 4. Consent to Medical and Dental Treatment.** I authorize FFA to secure for me and/or provide to me, through medical and dental personnel of its choice, customary medical and/or dental assistance, transportation, and emergency medical and/or dental services, including but not limited to X-ray, examination, anesthetic, medical or dental diagnosis or treatment and hospital care, to be rendered by any physician or dentist licensed to practice in the United States. I will assume all expenses involved in such medical/dental procedures and will not hold FFA, FFA representatives, and any individual performing tasks or work on behalf of FFA liable for any expenses.
- 5. Publication.** I authorize FFA to use my name, photo, video, materials produced for the Program, or presentation in Program, in FFA materials, including but not limited to educational resources, press releases, web-based publicity, and other publicity materials.
- 6. Code of Ethics.** I agree to abide by the FFA Code of Ethics, as stated in the Official Manual, as well as the code of conduct and guidelines for participation in the Program. I will conduct myself in a manner representative of the school, community, and the FFA. Any illegal substance or unlawful behavior may be reported to the proper local authorities.
- 7. Eligibility.** I hereby certify that I meet all eligibility requirements for participation in the FFA Program for the current year, as set forth by the National FFA Constitution and Indiana FFA Bylaws. Any material submitted and participation is the result of my own effort and ability and abides by all rules and policies.
- 8. Enforcement.** This document contains the entire agreement between me and the FFA with regard to the matters set forth in it. This document may be amended or modified only by a written document signed by the parties. Each term and provision of the document shall be valid and enforced separately to the fullest extent permitted by law. This document shall be governed, construed, and enforced in accordance with the law of the State of Indiana.

Indiana FFA Foundation & Leadership Center

There may be times throughout the year that students utilize the FFA Leadership Center property, which is owned by

Indiana FFA Foundation.

In the consideration of The Indiana FFA Foundation, Inc., an Indiana non-profit corporation (the "Owner"), allowing me to utilize camp grounds and related facilities located at 6595 S 125 W, Trafalgar, Johnson County, Indiana 46181 ("Facilities"), I, and if I am not 21 years old, my parent or legal guardian (individually and collectively referred to below in the first person singular), agree to be bound by each of the following as my voluntary act and deed:

1. Identification of Risks. I understand that the Owner may not be present during my use of the Facilities. I understand that my use of the Facilities may involve risk of injury and loss, both to person and to Facilities. I also understand that the risk of injury may include the possibility of permanent disability and/or death. I understand that this Waiver and Release of Liability and Assumption of Risk Acknowledgement ("Agreement") is intended to address all of the risks of any kind associated with my use of the Facilities in any respect, or with the time I am at the Facilities, including, particularly, such risks created by actions, inactions, or negligence on the part of the Owner or its employees, agents, volunteers, successors, or assigns, including but not limited to risks created by the following: (a) the use and condition of the premises, facilities, and equipment; (b) the failure of the Owner to foresee or to protect me from actions, inactions, negligence, recklessness, or intentional or criminal misconduct of persons; (c) the inadequacy or unavailability of medical facilities or treatment; or (d) the lack or inadequacy of supervision at the Facilities.

2. Assumption of Risk. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE OWNER, as listed above, or others and assume FULL AND ABSOLUTE responsibility for my and/or my invitees or licensees use of the Facilities.

3. Release and Waiver. I hereby release the Owner and its directors, officers, sureties, employees, agents, volunteers, successors and assigns (collectively, the "Owner Parties") of and from any and all claims for injury, loss, damages, actions and causes of action, claims and demands whatsoever, whether known or unknown and whether or not founded in fact or in law, and of and from any and all manner of suits, liabilities, losses, covenants, controversies, agreements, promises, damages, judgments, claims and demands whatsoever in law or in equity including, but not limited to, those arising out of or in any way related to my and/or my invitees or licensees use of the Facilities (each a "Claim"), and all acts or omissions related thereto, whether or not caused in whole or part by the negligence or other misconduct of any of the Owner Parties, from the beginning of the world to the end of the Term, as defined below, of this Agreement, which the undersigned has had or now has or which he/she or his/her heirs, administrators, successors and assigns hereafter can shall or may have or acquired.

4. Indemnification. I, on behalf of myself and my administrators, heirs, successors, and assigns, hereby voluntarily agree to RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, DEFEND AND INDEMNIFY the Owner Parties of and from any and all claims for injury, loss, damages, actions and causes of actions, claims and demands whatsoever, whether known or unknown and whether or not founded in fact or in law, and of and from any and all manner of suits, liabilities, losses, covenants, controversies, agreements, promises, damages, judgments, claims and demands whatsoever in law or in equity including, but not limited to, those arising out of or in any way related to my and/or my invitees or licensees use of the Facilities, and all acts or omissions related thereto, whether or not caused in whole or part by the negligence or other misconduct of any of the Owners Parties, from the beginning of the world to the end of the Term, defines below, which the undersigned has had or now has or which he/she or his/her heirs, administrators, successors, and assigns hereafter can, shall or may have or acquire. I specifically understand that I am releasing, discharging and waiving any claims or actions that I any have presently or in the future for the negligent acts or other misconduct by any of the Owner Parties.

5. Personal Likeness Release and Waiver. I understand that my or my invitees or licensees personal likeness, both in print and video, may be used by the Owner or Owner Parties for official purposes in publications such as, but not limited to, websites, brochures, Facebook, Twitter or other digital or print media for the purpose of informing others about the use of the Facilities or promotion of the Facilities.

6. Binding Effect. This Agreement shall be binding upon my relatives, personal representatives, heirs, beneficiaries, next of kin, or assigns and shall inure to the benefit of the Owner and its successors and assigns.

7. Severability. If any term or provision of this instrument or the application thereof to any person or circumstances shall to any extent or for any reason be invalid or unenforceable, the remainder of this instrument and the application of such term or provision to persons or circumstances other than those as to which it is held invalid or unenforceable shall not be affected thereby, and each term and provision of the instrument shall be valid and enforced to the fullest extent permitted by law.

(If bringing medications to the conference, please only bring enough for the duration of the conference in the original prescription bottle. The nurse will manage any medications that are considered controlled substances. All other medications will be the responsibility of the student, unless requested otherwise by the parents/student.)

The following over-the-counter medications may be used as an on needed basis to treat a variety of complaints and simple illnesses or injury such as: Tylenol, ibuprofen, cough syrup, diarrhea/anti-diarrhea, antacid, Benadryl or antibacterial ointment, hydrogen peroxide, burn ointment, Band-Aids. Please note in medication section below any of the above items that should NOT be used or ADDED to the list that you would prefer your student not use/take.

Signatures & Emergency Information

The undersigned Student Participant and Parent/Guardian affirm they have read and understand the terms of this Indiana FFA Consent & Waiver Document. By signing below, the Student Participant and Parent/Guardian voluntarily consent to giving up substantial rights and understand that if they make changes to the terms of this Indiana FFA Consent & Waiver Document, the Student Participant will not be able to participate in any FFA program or activity.

Parent/Guardian signature required for all participants under the age of 21; both participant and parent/guardian signatures are required.

Name

Email Address

DOB

Emergency Contact Name

Emergency Contact Number

Medical Conditions

Medications

Physician Information

Signed

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