SCHOOL RELEASE

Student Name and School:

Partner Name and School:

(Note: Each student must fill out a separate copy of the form. We do NOT accept digitally signed copies.)

I, (Principal, Vice Principal/Equivalent, or District Superintendent) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

INITIAL TO ACKNOWLEDGE THE FOLLOWING:

\_\_\_\_\_I endorse the above named student to compete at the 2018 Santa Clara University Dempsey Cronin Invitational (SCU DC) with the above named partner. This student is not, to the best of my knowledge, on academic probation and has not committed disciplinary violations which would disqualify them from participating in school-sponsored extracurricular activities

\_\_\_\_\_I endorse the following chaperon, (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is either a district-approved chaperon or the parent/guardian of the named student, to remain with the student at the event site for the duration of the tournament and to be responsible for the behavior, safety, and supervision of the student. This chaperon has agreed to enforce school/district policies as well as general SCU DC rules while the student is participating in the event.

INITIAL ONE OF THE FOLLOWING AFTER COACH OR PROGRAM DIRECTOR HAS SIGNED

1. [IF SCHOOL HAS A DEBATE PROGRAM WITH A SCHOOL-SANCTIONED HEAD COACH]

\_\_\_\_\_I have consulted with the Head Coach/Director of Forensics of the student’s high school debate program, who has affirmed that they approve the above named student to compete at the SCU DC with the above named partner.

OR

2. [IF SCHOOL DOES NOT HAVE A DEBATE PROGRAM OR A SCHOOL-SANCTIONED HEAD COACH]

\_\_\_\_\_I authorize the student named to compete under an independent name.

Print Head Coach/Program Director Name:

Email:

Phone:

Head Coach/Program Director Signature:

Print School Administrator Name:

School or District:

Preferred method of contact:

Signature:

PARENT RELEASE

Student Name:

(Note: Each student must fill out a separate copy of the form. We do NOT accept digitally signed copies.)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

I. INITIAL ONE OF THE FOLLOWING

\_\_\_\_\_I endorse (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is a district-approved chaperon, to remain with my child at the event site for the duration of the tournament. This chaperon is responsible for the behavior, safety, or supervision of my student.

OR

\_\_\_\_\_I will remain with my child at the event site for the duration of the tournament and will be responsible for the behavior, safety, or supervision of my student.

II. INITIAL TO ACKNOWLEDGE THE FOLLOWING:

\_\_\_\_\_I condone my child’s presence at the 2018 Santa Clara University Dempsey Cronin (SCU DC).

\_\_\_\_\_My child or their chaperon is carrying an emergency medical form for my student while at the tournament site. The chaperon is authorized to make emergency medical decisions for my child should they be unresponsive.

\_\_\_\_\_I release Santa Clara University, and all its tournament staff members, from all legal and financial responsibility for any harm that my child or our property might suffer as a result of our failure to meet any listed obligations.

III. INITIAL ONE OF THE FOLLOWING

\_\_\_\_\_My child’s school has a Head Coach or Director of Forensics, (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and this individual has my consent to handle administrative aspects of the tournament for my child.

OR

\_\_\_\_\_My child’s school does not have a Head Coach or Director of Forensics, so I authorize (name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to handle administrative aspects of this tournament for my child.

Print Name:

Email:

Phone:

Signature: