Sandia National Laboratories
U.S. DEPARTMENT OF ENERGY NNSA

STUDENT PARTICIPATION IN EDUCATION PROGRAM RELEASE FORM

1. Voluntary Participation: I, _____, acknowledge that my child/ I,
(Parent/ Legal guardian name, or N/A if student is age 18 or older)

_____ is/ am voluntarily participating in a Sandia National Laboratories' Education
(Student's name)

_____ _____
School Name *Grade of Student*

Outreach program ("Program").

2. Assumption of Risk: I understand that there exist potential risks incidental to my child/ myself participating in the Program. I am aware that certain of these dangers and hazards may be incidental to the activities involved. I also realize that not all the risks and hazards of these activities are known. I give my permission for my child/ myself to participate in this activity with knowledge of the possible risk involved of personal injury or property damage. I understand that it is my personal responsibility to judge the suitability of my child's/ my participation in the Program.

3. Release of Claims: As consideration for my child/my being permitted to participate in the Program and use of any equipment and the facilities, I agree that I, my assignees, heirs, guardians, and legal representatives will not make a claim against National Technology and Engineering Solutions of Sandia (NTESS), LLC a wholly owned subsidiary of Honeywell International, Inc. which operates Sandia National Laboratories, for any personal injury or property damage resulting from negligence or other acts, howsoever caused, by any employee, officer, agent, subcontractor, or instructor (independent contractor or otherwise) of NTESS, or any other third party, as a result of my child's/ my participation in the Program. I hereby release NTESS, of all liability or responsibility that my assignees, heirs, guardians, and legal representatives may have or may hereafter have for personal injury or property damage resulting from my child's/my participation in the Program.

I agree that in the event any claim for personal injury or property damage shall be prosecuted against NTESS, its agents, officers, employees, subcontractors, instructors (independent contractors or otherwise), I, my assignees, heirs, guardians, and legal representative shall hold NTESS, it's agents, officers, employees, subcontractors, instructors (independent contractors or otherwise), harmless from any and all claims or causes of action by whomever or wherever made or presented for personal injuries or property damage.

4. Consent for Medical Care: I grant NTESS permission to initiate and arrange for emergency medical or surgical treatment, including hospitalization if necessary, in the event my child/myself becomes ill or is injured while at Sandia. I understand that every reasonable attempt will be made to contact me prior to taking this action.

5. Photo/Video Release: I grant NTESS permission to photograph or videotape my child/ me for promotional, educational, and media related purposes.

☐ Please check here if you prefer student to NOT be photographed or videotaped.

6. Knowing and Voluntary Execution: I have carefully read this Student Participation in Education Program Release Form and fully understand its contents. I am aware this is a release of liability and contract between myself and NTESS and sign it of my own free will. I am fully aware of the legal consequences of signing this document.

(Students age 18 and older should complete the information and signature blocks below on their own behalf, as non-minor participants)

_____ _____ _____
Parent/ Guardian/ Non-Minor Participant Name (Print) Parent/ Guardian/ Non-Minor Participant Signature Date

_____ _____
Parent/ Guardian/ Non-Minor Participant Phone Number Parent/ Guardian/ Non-Minor Participant Email & Alternate Phone Number

IN CASE OF AN EMERGENCY CONTACT:

_____ _____
Name Phone Number